

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026092

FILED
Apr 24, 2006
Secretary of State

Entity Name: MDA, L.L.C.

Current Principal Place of Business:

10050 N.W. 116TH WAY, SUITE #18
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

10050 N.W. 116TH WAY, SUITE #18
MIAMI, FL 33178

New Mailing Address:

FEI Number: 71-0907025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUZMAN, MARIO I
9130 S. DADELAND BLVD., SUITE 1504
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HALPERN, DANIEL
Address: 3 DE FEBRERO 2220 FLOOR 4
City-St-Zip: BUENOS AIRES (1428)ARGENTINA,

Title: MGRM () Delete
Name: GLANZ, MARK IAN
Address: AV. SANTA FE 2862 FLOOR 11, APT. #31
City-St-Zip: BUENOS AIRES (1425)ARGENTINA,

Title: MGRM () Delete
Name: RONDON, HENRY N
Address: 19720 N.W. 9TH DRIVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HENRY RONDON

MNGR

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date