

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026537

FILED
Aug 12, 2004
Secretary of State

Entity Name: ARAGON U.S., LLC

Current Principal Place of Business:

11527 BUCKHAVEN LANE
WEST PALM BEACH, FL 33412 US

New Principal Place of Business:

Current Mailing Address:

11527 BUCKHAVEN LANE
WEST PALM BEACH, FL 33412 US

New Mailing Address:

FEI Number: 20-1484107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FENG, GRETCHEN L
11527 BUCKHAVEN LANE
WEST PALM BEACH, FL 33412 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/MEMBERS:

Title: MGR () Delete
Name: FENG, GRETCHEN L
Address: 11527 BUCKHAVEN LANE
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: MEM () Delete
Name: FENG, F. DAVID
Address: 11527 BUCKHAVEN LANE
City-St-Zip: WEST PALM BEACH, FL 33412 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FENG, GRETCHEN L
Address: 11527 BUCKHAVEN LANE
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: MGR (X) Change () Addition
Name: FENG, F. DAVID
Address: 11527 BUCKHAVEN LANE
City-St-Zip: WEST PALM BEACH, FL 33412 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GRETCHEN L FENG

MGRM

08/12/2004

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