2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2005
Secretary of State

DOCUMENT# L02000026832

Entity Name: UPTREND INVESTMENT GROUP, L.L.C.

Current Principal Place of Business:

13200 S.W. 128TH STREET, BLDG. G
MIAMI, FL 33186

New Principal Place of Business:

12901 SW 132 AVENUE
MIAMI, FL 33186

Current Mailing Address:

13200 S.W. 128TH STREET, BLDG. G
MIAMI, FL 33186

New Mailing Address:

12901 SW 132 AVENUE
MIAMI, FL 33186

FEI Number: 11-3658966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIGUERAS, JUAN E
7050 S.W. 86TH AVENUE
MIAMI, FL 33143 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: MGRM ( ) Delete
Name: QUINTANA, MANUEL O
Address: 15321 S.W. 152ND TERRACE
City-St-Zip: MIAMI, FL 33187

Title: MGRM ( ) Delete
Name: OLIVEROS, JOSE LUIS
Address: 6821 S.W. 128TH PLACE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: QUINTANA, MANUEL O
Address: 15321 SW 152 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: MGRM (X) Change ( ) Addition
Name: OLIVEROS, JOSE LUIS
Address: 15386 SW 21 LANE
City-St-Zip: MIAMI, FL 33185

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: MANUEL QUINTANA MGRM 04/07/2005

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