


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 24, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000028269**

1. Entity Name  
**GRUPO LUCAYA, LLC**



Principal Place of Business      Mailing Address

48 EAST FLAGLER ST.  
 SUITE 379  
 MIAMI, FL 33131    US

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 SUITE 379  
 MIAMI, FL 33131    US

**DO NOT WRITE IN THIS SPACE**



01142005No Chg-LLC      CR2E083 (10/03)

4. FEI Number      Applied For  
 01-0755218      Not Applicable

5. Certificate of Status Desired       \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLD, SALOMON  
 48 EAST FLAGLER ST.  
 SUITE 379  
 MIAMI, FL 33131

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE Registered Agent signature required when relistating)      DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00  
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLD, JACOBO 1643 BRICKELL AVE. MIAMI, FL 33129
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U00000184348  
 01/25/05-80097-022 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:       Date: 1/19/05      Daytime Phone #: 305.374.1816

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE