

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000029128

1. Entity Name
NICOTERA, LLC



Principal Place of Business
2307 DOUGLAS RD
400
MIAMI, FL 33145 US

Mailing Address
2307 DOUGLAS RD
400
MIAMI, FL 33145 US

DO NOT WRITE IN THIS SPACE



04292004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
59-3761857

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

OVIES, IDA C
2307 DOUGLAS RD
400
MIAMI, FL 33145

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

000000147835
05/03/04-80124-006 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
CAPRIA, DOMINGO A
JOSE C PAZ - 1015, ACASSUSO-CP(1641)
BUENOS AIRES, BA 1641

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
DE CAPRIA, YOLANDA CASAL
JOSE C PAZ - 1015, ACASSUSO-CP(1641)
BUENOS AIRES, BA 1641

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Domingo Capria

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

Date

Daytime Phone #

4/29/04

305 447 8801