

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000063

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: CONDOR HUASI, LLC

**Current Principal Place of Business:**

16300 NE 19 AVE.  
C  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

16300 NE 19 AVE.  
C  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 02-0659740      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SILVA, FERNANDO  
16300 NE 19 AVE  
C  
NORTH MIAMI BEACH, FL 33162 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: BABINI, HORACIO  
Address: 16300 NE 19 AVE. SUITE C  
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete  
Name: LLORENS, PABLO  
Address: 16300 NE 19 AVE SUITE C  
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete  
Name: CAMINOTTI, JORGE  
Address: 16300 NE 19 AVE. SUITE C  
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete  
Name: JADOT, THIERRY  
Address: 16300 NE 19 AVE. SUITE C  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

**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:

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 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: HORACIO BABINI

MGRM

04/27/2004

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