2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005681

Entity Name: GIRALDA INVESTMENTS, LLC

9900 WEST CALUSA CLUB DRIVE

MIAMI, FL 33186 US

Address:

City-St-Zip:

FILED Aug 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13250 SW 99 STREET MIAMI, FL 33186 **Current Mailing Address: New Mailing Address:** 13250 SW 99 STREET MIAMI, FL 33186 FEI Number: 01-0774074 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DELGADO, ALEJANDRO 9900 WEST CALUSA CLUB DRIVE MIAMI, FL 33186 US 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: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete CAMBRIA, PIETRO Name: Name: 13250 SW 99 STREET Address: Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: DELGADO, GISA Name: Address: 9900 WEST CALUSA CLUB DRIVE Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DELGADO, ALEJANDRO Name: Name: Address: 9900 WEST CALUSA CLUB DRIVE Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DELGADO, IRENE Name: 9900 WEST CALUSA CLUB DRIVE Address: Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: Title: Title: MGRM () Delete () Change () Addition DELGADO, DANIELA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: PIETRO CAMBRIA MGR 08/05/2004