2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016152

Title:

Name:

Address:

City-St-Zip:

MGR

(X) Delete

21355 E DIXIE HWY SUITE 101

CORKIDI, MOISES MGR

AVENTURA, FL 33180 US

Entity Name: ALL WELL INVESTMENTS, LLC

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 21355 E DIXIE HWY SUITE 101 AVENTURA, FL 33180 **New Mailing Address: Current Mailing Address:** 21355 E DIXIE HWY SUITE 101 AVENTURA, FL 33180 US FEI Number: 02-0696418 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: FROMBERG, PERLOW & KORNIK, P.A. CORKIDI, JOSE MGR 18901 N.E. 29 AVENUE 21355 EAST DIXIE HWY. SUITE 100 101 AVENTURA, FL 33180 US AVENTURA, FL 33180 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: JOSE CORKIDI 04/18/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete CORKIDI DE LEDERMAN, VIVIANNE MGR Name: Name: 21355 YACHT CLUB DRIVE APT.3203 Address: Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition LEDERMAN, MAX MGR Name: CORKIDI, JOSE MGR Name: Address: 21355 YACHT CLUB DRIVE APT. 203 Address: 21355 E DIXIE HIGHWAY # 101 City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: AVENTURA, FL 33180 US Title: MGR (X) Delete Title: () Change () Addition CORKIDI, JOSE MGR Name: Name: 21355 E DIXIE HWY SUITE 101 Address: Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: JOSE CORKIDI MGR 04/18/2008