2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017411

Name:

Address:

City-St-Zip:

19333 COLLINS AVE, #2007

SUNNY ISLES, FL 33160

Entity Name: CITYONE MORTGAGE ADANA INVEST & TRADE, LLC

FILED Jan 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 19333 COLLINS AVENUE UNIT #2007 SUNNY ISLES BEACH, FL 33160 **New Mailing Address: Current Mailing Address:** 19333 COLLINS AVENUE UNIT #2007 SUNNY ISLES BEACH, FL 33160 FEI Number: 80-0064856 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: DIAZ-SARMIENTO, GABRIEL S CPA DIAZ-SARMIENTO, GABRIEL S CPA 15588 SW 62 STREET 1985 NW 88 COURT SUITE 201 MIAMI, FL 33193 MIAMI, FL 33172 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: GABRIEL S. DIAZ-SARMIENTO 01/13/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ARREAZA, RAFAEL O Name: Name: 19333 COLLINS AVE, #2007 Address: Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ADANA INVEST & TRADE, CORP. Name: Name: Address: 19333 COLLINS AVE. #2007 Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: Title: MGR () Delete Title: () Change () Addition AÑEZ CASTILLO, HELIMENAS A Name: Name: Address: 19333 COLLINS AVE. #2007 Address: City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: () Delete Title: MGR Title: () Change () Addition DE ARREAZA, MARIA B

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ARREAZA, RAFAEL O. **MGRM** 01/13/2005