

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018254

FILED
Apr 08, 2006
Secretary of State

Entity Name: ONE WORLD SUPPLY LLC

Current Principal Place of Business:

7255 NW 68 STREET
#17
MIAMI, FL 33166

New Principal Place of Business:

7502 NW 112 PATH
MIAMI, FL 33178

Current Mailing Address:

7255 NW 68 STREET
#17
MIAMI, FL 33166

New Mailing Address:

7502 NW 112 PATH
MIAMI, FL 33178

FEI Number: 86-1069357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARMIENTO, CLARA I
7255 NW 68 STREET
#17
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

ORTIZ, IVAN F
7502 NW 112 PATH
MIAMI, FL 33178 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: IVAN F. ORTIZ

04/08/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ORTIZ, IVAN F SR
Address: 7255 NW 68 STREET #17
City-St-Zip: MIAMI, FL 33166

Title: MGRM () Delete
Name: SARMIENTO, MONICA
Address: 7255 NW 68 STREET #17
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ORTIZ, IVAN F SR
Address: 7502 NW 112 PATH
City-St-Zip: MIAMI, FL 33178

Title: MGRM (X) Change () Addition
Name: SARMIENTO, MONICA
Address: 7502 NW 112 PATH
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: IVAN F. ORTIZ

MGRM

04/08/2006

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