2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 90123 003 ****50.00

DOCUMENT # L03000021541

1. Entity Name
WGI, LLC

Principal Place of Business	Mailing Address
12550 BISCAYNE BLVD., STE. 405 NORTH MIAMI, FL 33181	12550 BISCAYNE BLVD., STE. 405 NORTH MIAMI, FL 33181

04272004 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
1911 HARRISON Street	1911 HARRISON Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hollywood, FLORIDA	City & State: Hollywood, FLORIDA
Zip: 33020 Country: U.S.A	Zip: 33020. Country: U.S.A

4. FEI Number: 59-3778450 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FRISALES-RACINI, OSCAR ESQ 12550 BISCAYNE BLVD., STE. 405 NORTH MIAMI, FL 33181	Name: GRISALES-RACINI, OSCAR, ESQ Street Address (P.O. Box Number is Not Acceptable): 1911 HARRISON Street. City: Hollywood FL Zip Code: 33020

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 4/28/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ELBINGER, MARCELO 12550 BISCAYNE BLVD., STE. 405 NORTH MIAMI, FL 33181	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ElBINGER, MARCELO 1911 HARRISON Street Hollywood, FL 33020	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAIARIOL, VICTOR 12550 BISCAYNE BLVD., STE. 405 NORTH MIAMI, FL 33181	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAIARIOL, VICTOR 1911 HARRISON Street Hollywood, FL 33020	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] POA 4/28/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #