

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030505

FILED
May 01, 2009
Secretary of State

Entity Name: KUBIK L.L.C.

Current Principal Place of Business:

5582 NE 4TH CT STE 5
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

5582 NE 4TH CT STE 5
MIAMI, FL 33137

New Mailing Address:

FEI Number: 51-0479023 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEGA, JOSE CAMILO
5582 NE 4TH CT
SUITE 5
MIAMI, FL 33137 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/MANAGERS:

Title: MGRM () Delete
Name: BISCAYNE PREMIER INVESTMENT INC
Address: 5582 NE 4TH CT STE 5
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: INALBOS LLC
Address: 5582 NE 4TH CT STE 5
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: INVERLEG LLC
Address: 5582 NE 4TH CT STE 5
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: VISHNU INVESTMENTS LLC
Address: 5582 NE 4TH CT STE 5
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: LAB GROUP LLC
Address: 5582 NE 4TH CT STE 5
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: ISLA GRANDE LLC
Address: 5582 NE 4TH CT STE 5
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: OC

MGRM

05/01/2009

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