* 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Joseph F. Cabanas

FILED Aug 11, 2006 8:00 am Secretary of State

| 1. Entity Name MIM UNO INVESTMENTS, L.L.C. | | | 08-11-2006 90137 001 ***150.00 |
|--|----------------------|-------------------------------|--|
| Principal Place of Business | Mailing Address | 1 | 7 . |
| 110 WASHINGTON AVE 2404 | 9737 NW 41 ST 615 | | |
| MIAMI BEACH, FL 33139 | MIAMI, FL 33178 | | A STANDAN AN ABIER JINI ARMI RAMI BANK BANK FRITT INN RAME JANK ARIBA JIN JERA |
| 2. Principal Place of Business | 3. Mailing Address | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 08012006 Chg-LLC CR2E083 (11/05) |
| City & State | City & State | | 4. FEI Number 09 - 05 25 9 78 Applied For Not Applicable |
| Zip Country | Zip | Country | 5. Certificate of Status Desired 55.00 Additional Fee Required |
| 6. Name and Address of Curre | nt Registered Agent | l | 7. Name and Address of New Registered Agent |
| | | Cahan | as & AssociaTes P.A. (P.O. Box Number is Not Acceptable) |
| | | 10520 City Do | NW 16 ST, - STe. C 101 Ral FL Zip Code 33/72 |
| 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, typical or printed name of registered agent and title if applicable. (NOTE: Fr jatated Agent algorithm representating) DATE OATE | | | |
| Filing Fee is \$50.00 Due by September 6, 2006 | | | Make check payable to Florida Department of State |
| | BERS/MANAGERS | 10. | ADDITIONS/CHANGES |
| TITLE MGRM NAME BURGOS PASCUAL, MARIA V STREET ADDRESS 110 WASHINGTON AVE #240 | | STREET ADDRESS 110 | Rgos Pascual, Maria V. Washington Ave. #2404 |
| CITY-ST-ZIP MIAMI BEACH, FL 33139 | ☐ Delete | CIT-SI-ZIP MIC | ami Beach, F1.33/39 |
| NAME | C Delete | 1,203 | scual de Burgos, Marina |
| STREET ADDRESS CITY-ST-ZIP | | CITY-ST-ZIP | Washington Ave #2404 ami Beach Fl. 33139 |
| TITLE NAME | ☐ Delete | TITLE M9 | PRANS MARTINEZ ISIARD |
| STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS 110 | Washington Ave #2404 ami Beach, Fl. 33139 |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME STREET ADDRESS | | NAME STREET ADDRESS | |
| CITY-ST-ZIP | □ Potes | CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME | ☐ Delete | TITLE NAME | Change Auunion |
| STREET ADDRESS CITY-ST-ZIP | | STREET ADDRESS CITY-ST-ZIP | |
| THE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
| NAME STREET ADDRESS | | NAME STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 of trustge empowered to execute this report as required by Chapter 608, Florida Statutes. | | | |
| Sa Ad James | | | |
| SIGNATURE: 08/02/06 (305) 594/098 | | | |