2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS CITY-S1-22P ITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-2P

Feb 23, 2006 8:00 am Secretary of State 01-24-2006 90041 040 ****50.00 2O CUMENT # L030000314144 HISPANIC CONSULTING GROUP LLC Principal Place of Business Mailing Address 30000916 135 HAMPTON LANE 135 HAMPTON LANE KEY BISCAYNE, FL 33149 KEY BISCAYNE, FL 33149 01102006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0172174 Not Applicable \$5,00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ARENTSEN, MARIAS 135 HAMPTON LANE KEY BISCAYNE, FL 33149 IN THIS SPACE 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. (HOTE; Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS MGR HILE ARENTSEN, MATIAS 135 HAMPTON LANE STREET ADDRESS CITY-ST-ZIP KEY BISCAYNE, FL 33149 MLE NAME STREET ACCRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE IIILE IN THIS SPACE

FILED

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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: D TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE