

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000035074

**FILED**  
**Mar 08, 2005**  
**Secretary of State**

**Entity Name:** INVERSIONES DE SUD AMERICA, LLC

**Current Principal Place of Business:**

31 ROUTE 281 NORTH  
LAKE TOXAWAY, NC 28747

**New Principal Place of Business:**

436 BLUE RIDGE ROAD  
LAKE TOXAWAY, NC 28747

**Current Mailing Address:**

2101 NW CORPORATE BLVD., STE. 107  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 20-0236390

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

M & W AGENTS, INC.  
2101 CORPORATE BLVD., STE. 107  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

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/MEMBERS:**

Title: MGR ( ) Delete  
Name: MOLLOV, LONNIE B MGR  
Address: 31 ROUTE 281 NORTH  
City-St-Zip: LAKE TOXAWAY, NC

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LONNIE BARBARA MOLLOV

MGR

03/08/2005

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