

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000036943

FILED
Jul 12, 2005
Secretary of State

Entity Name: ILUSMO INVESTMENTS LLC

Current Principal Place of Business:

1300 BRICKELL AVENUE
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1300 BRICKELL AVENUE
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-1823454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

SANCHEZ, MILAGROS
1300 BRICKELL AVE.
MIAMI, FL, FL 33131 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: MILAGROS SANCHEZ

07/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SANCHEZ, MILAGROS
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: MOLINA, LUZ SHELLA
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOLINA, IVAN
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change () Addition
Name: MOLINA, LUZ STELLA
Address: 1300 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

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: IVAN MOLINA

MGR

07/12/2005

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