2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2004
Secretary of State

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Entity Name: ROMA INVESTMENT, LLC

Current Principal Place of Business:

C/O 1390 BRICKELL AVE., STE. 200
MIAMI, FL 33131

New Principal Place of Business:

765 CRANDON BLVD.
112
MIAMI, FL 33149

Current Mailing Address:

C/O 1390 BRICKELL AVE., STE. 200
MIAMI, FL 33131

New Mailing Address:

765 CRANDON BLVD.
MIAMI, FL 33131

FEI Number: 33-1073272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVARO CASTILLO B., P.A.
1390 BRICKELL AVE., STE. 200
MIAMI, FL 33131 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: ROBLES-MARTINEZ, JORGE
Address: C/O 1390 BRICKELL AVE., STE. 200
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Delete
Name: LINDO, ANA CRISTINA
Address: C/O 1390 BRICKELL AVE., STE. 200
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ROBLES-MARTINEZ, JORGE A
Address: 765 CRANDON BLVD., 112
City-St-Zip: MIAMI, FL 33149

Title: MGRM (X) Change ( ) Addition
Name: LINDO, ANA CRISTINA
Address: 765 CRANDON BLVD., 112
City-St-Zip: MIAMI, FL 33149

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: JORGE A. ROBLES-MARTINEZ MGRM 03/26/2004

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