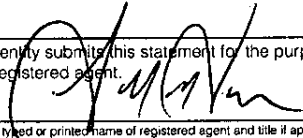


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90053 024 ****50.00

DOCUMENT # L03000043448 1. Entity Name CONSTRUCTA PROPERTIES, LLC																			
Principal Place of Business 1501 COLLINS AVE., 3RD FLOOR MIAMI BEACH, FL 33139			Mailing Address 1501 COLLINS AVE., 3RD FLOOR MIAMI BEACH, FL 33139																
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 520 Brickell Key Dr. #305 Suite, Apt. #, etc. Suite 0-305 City & State Miami FL Zip 33131 Country USA		24054431 															
4. FEI Number 08-0575055		03082004 Chg-LLC CR2E083 (10/03)		Applied For ☐ Not Applicable															
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent TRANSGLOBAL CORPORATE ADMINISTRATION, INC 520 BRICKELL KEY DR, STE O-305 MIAMI, FL 33131															
7. Name and Address of New Registered Agent Name Transglobal Corporate Administration, LLC Street Address (P.O. Box Number is Not Acceptable) 520 Brickell Key Dr Suite 0-305 City Miami FL Zip Code 33131				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  DATE 4/18/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)															
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State		9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> MGR BARBERA, JACQUES 1501 COLLINS AVE., 3RD FLOOR MIAMI BEACH, FL 33139 ☐ Delete </td> </tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BARBERA, JACQUES 1501 COLLINS AVE., 3RD FLOOR MIAMI BEACH, FL 33139 ☐ Delete												
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BARBERA, JACQUES 1501 COLLINS AVE., 3RD FLOOR MIAMI BEACH, FL 33139 ☐ Delete																		
10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> ☐ Change ☐ Addition </td> </tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> <tr><td colspan="2" style="height: 40px;"></td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition													11. I hereby certify that the information supplied with this filing does not qualify 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 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.			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition																		
SIGNATURE:  Jacques Barbera SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		03/18/04 Date		305-538-0135 Daytime Phone #															