## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051595

Entity Name: MAPI, LLC

FILED Jan 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4835 LAKEVIEW DRIVE 1504 BAY RD # 519 MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

4835 LAKEVIEW DRIVE 1504 BAY RD # 519
MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33139

FEI Number: 03-0535942 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NORMA, MARCO
4835 LAKEVIEW DRIVE
MIAMI BEACH, FL 33140 US

NORMA, MARCO
1504 BAY RD # 519
MIAMI BEACH, FL 33139 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: MARCO NORMA 01/10/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 MARCO, NORMA
 Name:
 MARCO, NORMA

 Address:
 4835 LAKEVIEW DRIVE
 Address:
 1504 BAY RD # 519

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition Name: MARCO, NORMA Name: MARCO, NORMA Address: 4835 LAKEVIEW DRIVE Address: 1504 BAY RD # 519 City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARCO NORMA PRES 01/10/2006