

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052327

Entity Name: NELESCA GROUP LLC

FILED
Jul 12, 2006
Secretary of State

Current Principal Place of Business:

2550 GREENWOOD DRIVE
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

2550 GREENWOOD DRIVE
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 20-0510496 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BENAVIDES, SILVIA
2550 GREENWOOD DRIVE
KISSIMMEE, FL 34744 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BENAVIDES, SILVIA
Address: 2550 GREENWOOD DR.
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: BENAVIDES, GUILLERMO
Address: 2550 GREENWOOD DR.
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: BENAVIDES, NELSON
Address: 2550 GREENWOOD DR
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: BENAVIDES, SERGIO
Address: 2550 GREENWOOD DR
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES:

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

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

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

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 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: SILVIA BENAVIDES

MGRM

07/12/2006

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