

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056398

FILED
Apr 28, 2005
Secretary of State

Entity Name: PERUGIFT LLC

Current Principal Place of Business:

464 MISTY OAK RUN
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

464 MISTY OAK RUN
CASSELBERRY, FL 32707 US

New Mailing Address:

815 MOSBY HOLLOW DR
HERNDON, FL 20170 US

FEI Number: 20-0694991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS, EDILBERTO
464 MISTY OAK RUN
CASSELBERRY, FL 32707 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: MGRM () Delete
Name: RAMOS, EDILBERTO
Address: 464 MISTY OAK RUN
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGRM () Delete
Name: VILLACORTA, JORGE
Address: MONTE DE LOS OLIVOS 175 DPTO 101
City-St-Zip: LIMA, LI 33 PE

Title: MGRM (X) Delete
Name: CRUZATE, ALICIA
Address: MONTE DE LOS OLIVOS 175 DPTO 101
City-St-Zip: LIMA, LI 33 PE

Title: MGRM (X) Delete
Name: ORTIZ, MIGUEL
Address: MONTE DE LOS OLIVOS 175 DPTO 101
City-St-Zip: LIMA, LI 33 PE

Title: MGRM (X) Delete
Name: LOO, JOSE
Address: MONTE DE LOS OLIVOS 175 DPTO 101
City-St-Zip: LIMA, LI 33 PE

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ORTIZ, MIGUEL
Address: MONTE DE LOS OLIVOS 175 DPTO 101
City-St-Zip: LIMA, LI 33 PE

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 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: EDILBERTO M RAMOS

MGR

04/28/2005

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