

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000057073

Entity Name: SILVERBAND, LLC

FILED
Jan 12, 2007
Secretary of State

Current Principal Place of Business:

1936 N.W. 79 AVE.
DORAL, FL 33126 US

New Principal Place of Business:

1740 SW 64 AVENUE
MIAMI, FL 33155 US

Current Mailing Address:

1936 N.W. 79 AVE.
DORAL, FL 33126 US

New Mailing Address:

1740 SW 64 AVENUE
MIAMI, FL 33155 US

FEI Number: 32-0103471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE VARONA, ALEJANDRO D
3191 CORAL WAY
SUITE 637
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

DE VARONA, ALEJANDRO D
255 ALHAMBRA CIRCLE
SUITE 520
CORAL GABLES, FL 33134 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:

01/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SILVA, CHRISTOPHER A
Address: 2400 BRICKELL AVE, APT. 107D
City-St-Zip: MIAMI, FL 33129 US

Title: MGR () Delete
Name: BANDRICH, LUIS A
Address: 15 SAMANA DRIVE
City-St-Zip: MIAMI, FL 33133 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SILVA, CHRISTOPHER A
Address: 1740 SW 64 AVENUE
City-St-Zip: MIAMI, FL 33155 US

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: CHRISTOPHER SILVA

MGR

01/12/2007

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