

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006895

FILED  
Mar 15, 2007  
Secretary of State

**Entity Name:** THE ALTA GROUP LATIN AMERICAN REGION, LLC

**Current Principal Place of Business:**

1920 LAKESHORE DR  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

8930 STATE RD. 84  
# 289  
DAVIE, FL 33324

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

FORSTER, KATRIN D  
9713 N NEW RIVER CANAL RD.  
303  
PLANTATION, FL 33324 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: CASTILLO-TRIANA, RAFAEL G  
Address: 1920 LAKESHORE DR  
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete  
Name: FORSTER, KATRIN D  
Address: 9713 N NEW RIVER CANAL RD. # 303  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

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: KATRIN D FORSTER

MGR

03/15/2007

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