2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2005
Secretary of State

DOCUMENT# L04000008641

Entity Name: MASTERS INVESTMENTS GROUP, LLC

Current Principal Place of Business:

9449 CARLYLE AVE.
SURFSIDE, FL 33154

New Principal Place of Business:

3410 GALT OCEAN DRIVE
2104N
FT LAUDERDALE, FL 33308

Current Mailing Address:

9449 CARLYLE AVE
SURFSIDE, FL 33154

New Mailing Address:

3410 GALT OCEAN DR
2104N
FT LAUDERDALE, FL 33308

FEI Number: 20-0725381 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, JAVIER
9249 CARLYLE AVE
SURFRSIDE, FL 33154 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:	MGR	( ) Delete
Name:	ECHAVARRIA, ALVARO	
Address:	9249 CARLYLE AVE	
City-St-Zip:	SURFSIDE, FL 33154	
Title:	MGR	( ) Delete
Name:	TABARES, RUTH	
Address:	9249 CARLYLE AVE	
City-St-Zip:	SURFSIDE, FL 33154	
Title:	MGR	( ) Delete
Name:	MORALES, IVAN	
Address:	18151 NE 31 COURT APT. # 2012	
City-St-Zip:	AVENTURA, FL 33160	
Title:	MGR	( ) Delete
Name:	LONDONO, FELIPE	
Address:	3410 GALT OCEAN DR. APT. # 2104N	
City-St-Zip:	FT LAUDERDALE, FL 33308	
Title:	MGR	( ) Delete
Name:	LUIS FERNANDO SANCHE, Z	
Address:	9249 CARLYLE AVE	
City-St-Zip:	SURFSIDE, FL 33154	

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:		
Title:	MGR	(X) Change ( ) Addition
Name:	SANCHEZ, LUIS FERNANDO	
Address:	9249 CARLYLE AVE	
City-St-Zip:	SURFSIDE, FL 33154	

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: FELIPE LONDONO MGR 02/14/2005

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