

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90071 003 ***138.75

DOCUMENT # L04000009674	
1. Entity Name JOALAN INVESTMENT, LLC	

Principal Place of Business 4315 NW 7TH ST, STE NO 51 MIAMI, FL 33126	Mailing Address 4315 NW 7TH ST, STE NO 51 MIAMI, FL 33126
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2. Principal Place of Business - No P.O. Box # 560 NE 57 ST	3. Mailing Address 560 NE 57 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State MIAMI FL	City & State MIAMI FL
Zip 33137	Country USA
Zip 33137	Country USA

01042008 Chg-LLC CR2E083 (12/06)



4. FEI Number 20-0683245	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

8. Name and Address of Current Registered Agent SANTIAGO, JORGE 4315 NW 7TH ST, NO 51 MIAMI, FL 33126

7. Name and Address of New Registered Agent Name Angela Zuluaga Street Address (P.O. Box Number is Not Acceptable) 560 NE 57 ST City MIAMI FL Zip Code 33137
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE ANGELA Zuluaga <i>Angela Zuluaga</i>	DATE 02-08-08

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANGELA ZULUAGA DE CADENA TRANSVERSAL 38 NO 7228 MEDELLIN COLOMBIA, ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JOSE ANTONIO CADENA OSORIO TRANSVERSAL 38 NO 7228 MEDELLIN COLOMBIA, ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALEJANDRO CADENA ZULUAGA TRANSVERSAL 38 NO 7228 MEDELLIN COLOMBIA, ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Angela Zuluaga</i>	DATE 02-08-08 3057591195
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	