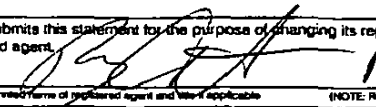
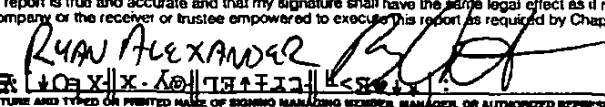


FILED  
Jul 22, 2005 8:00 am  
Secretary of State

04-28-2005 90032 010 \*\*\*\*50.00

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 |                                                                                          |                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # L04000010051.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 |         |                                                                   |
| 1. Entity Name<br><b>BERIMBAU INVESTMENTS L.L.C.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                 |                                                                                          |                                                                   |
| Principal Place of Business<br><b>3165 NEW YORK ST<br/>MIAMI, FL 33133</b>                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                 | Mailing Address<br><b>3165 NEW YORK ST<br/>MIAMI, FL 33133</b>                           |                                                                   |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                 | 3. Mailing Address                                                                       |                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                 | Suite, Apt. #, etc.                                                                      |                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                 | City & State                                                                             |                                                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Country                                                                                                         | Zip                                                                                      | Country                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 | 4. FEI Number<br><b>010808397</b>                                                        |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 | Applied For<br>Not Applicable                                                            |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 | 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required |                                                                   |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 | 7. Name and Address of New Registered Agent                                              |                                                                   |
| <b>ALEXANDER, RYAN<br/>3165 NEW YORK ST<br/>MIAMI, FL 33133</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> Zip Code |                                                                   |
| 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  <b>RYAN ALEXANDER</b>                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                 | DATE                                                                                     |                                                                   |
| Filing Fee is \$50.00<br>Due by May 1, 2005                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                 | Make check payable to<br>Florida Department of State                                     |                                                                   |
| 9. MANAGING MEMBERS / MANAGERS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                 | 10. ADDITIONS / CHANGES                                                                  |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>PRINCIPAL<br/>RYAN ALEXANDER<br/>3165 NEW YORK STREET<br/>MIAMI FL 33133</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 11. I hereby certify that the information supplied with this filing does not qualify 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 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  <b>RYAN ALEXANDER</b>                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                 | Date <b>19/APR/05</b> 3254432254                                                         |                                                                   |