2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED May 01, 2008 08:00 AN Secretary of State DOCUMENT # L04000010945 ____ MAPEYCO, LLC Principal Place of Business Mailing Address 18053 SW 139 PLACE 18053 SW 139 PLACE MIAMI, FL 33177 1050 MIAMI, FL 33177 04292008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0715124 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROMERO, LUIS DO NOT WRITE 18053 SW 139 AVE MIAMI, FL 33177 IN THIS SPACE 8. The above named entity promits the 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. (NOTE: Registered Agent signature required when reinstating) U00000936710 FILE NOW!!! FEE IS \$138.75 05/27/08-80020-018 138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS TITLE NAME ROMERO, LUIS 18053 SW 139 PL STREET ADDRESS MIAMI, FL 33177 CITY-ST-7IP TITLE MEJIA, MARITZA NAME STREET ADDRESS 18053 SW 139 PL CITY-ST-ZIP MIAMI, FL 33177 NAME STREET ADDRESS DO NOT WRIT CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP-

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daylime Phone #

TITLE NAME STREET ADDRESS CITY-ST-ZIP