

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013044

FILED
Feb 24, 2005
Secretary of State

Entity Name: CONSULTAD, LLC

Current Principal Place of Business:

2401 ANDERSON RD, STE 13
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2401 ANDERSON RD, STE 13
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-0751061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACINTER CORPORATION
5440 N STATE RD 7, STE 218
FORT LAUDERDALE, FL 33319 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: CHAVARRIA, ROBERTO H
Address: 2401 ANDERSON RD, STE 13
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: CHAVARRIA, HORACIO
Address: 2401 ANDERSON RD, STE 13
City-St-Zip: CORAL GABLES, FL 33134

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 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: ROBERTO H. CHAVARRIA

MGR

02/24/2005

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