2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013044

Entity Name: CONSULTAD, LLC

FILED Jul 12, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

2401 ANDERSON RD, STE 13 201 ALHAMBRA CIRCLE CORAL GABLES, FL 33134 SUITE 901

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2401 ANDERSON RD, STE 13 201 ALHAMBRA CIRCLE CORAL GABLES, FL 33134

SUITE 901

CORAL GABLES, FL 33134

FEI Number: 20-0751061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MACINTER CORPORATION 5440 N STATE RD 7, STE 218 FORT LAUDERDALÉ, FL 33319 US

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/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change () Addition

CHAVARRIA, ROBERTO H Name: Name: Address: 2401 ANDERSON RD, STE 13 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

CHAVARRIA, HORACIO Name: Name: Address: 2401 ANDERSON RD. STE 13 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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 07/12/2006