

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021711

Entity Name: FIESTA MARKETING, LLC

FILED
Mar 25, 2005
Secretary of State

Current Principal Place of Business:

2543 B NW 72 AVENUE
MIAMI, FL 33122

New Principal Place of Business:

7415 CORPORATE CENTER DRIVE
SUITE E
MIAMI, FL 33126

Current Mailing Address:

2543 B NW 72 AVENUE
MIAMI, FL 33122

New Mailing Address:

7415 CORPORATE CENTER DRIVE
SUITE E
MIAMI, FL 33126

FEI Number: 65-0734972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MICHAEL
2543 B NW 72 AVENUE
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

GARCIA, MICHAEL
7415 CORPORATE CENTER DRIVE
MIAMI, FL 33126 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: MICHAEL P GARCIA

03/25/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: GARCIA, MICHAEL P MGR
Address: 7415 CORPORATE CENTER DRIVE SUITE E
City-St-Zip: MIAMI, FL 33126 US

Title: MGR () Change (X) Addition
Name: GARCIA, ALEXANDER R MGR
Address: 7415 CORPORATE CENTER DRIVE SUITE E
City-St-Zip: MIAMI, FL 33126 US

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: MICHAEL P GARCIA

MGR

03/25/2005

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