

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024424

FILED  
Jun 07, 2005  
Secretary of State

Entity Name: INVESTMENTS 4-D FUTURE, LLC

**Current Principal Place of Business:**

310 LAKEVIEW DR, STE 201  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

310 LAKEVIEW DR, STE 201  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
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:**

CAMPO, JAIME  
310 LAKEVIEW DR, STE 201  
WESTON, FL 33326 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:**

Title: MGRM ( ) Delete  
Name: RENGIFO, ANA  
Address: 310 LAKEVIEW DR, STE 201  
City-St-Zip: WESTON, FL 33326

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: RODRIGUEZ, CAROLINA  
Address: 310 LAKEVIEW DR, STE 201  
City-St-Zip: WESTON, FL 33326

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: CAMPO, JAIME  
Address: 310 LAKEVIEW DR, STE 201  
City-St-Zip: WESTON, FL 33326

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: CARDONA, JAIME  
Address: CRA 115 #6-28 MIRMONTES A  
City-St-Zip: CASA 16, CALI COLOMBIA,

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: SALGADO, JAIME  
Address: 5620 NW 107 AVE #1505  
City-St-Zip: MIAMI, FL 33178

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: CURY, JORGE  
Address: 14012 NW 15TH DR  
City-St-Zip: PEMBROKE PINES, FL 33027

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: JAIME CAMPO

MGRM

06/07/2005

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