2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L04000026672

Entity Name: VKGROUP, LLC

Current Principal Place of Business:

7765 NW 48TH STREET, SUITE 300
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

C/O 1200 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-1167014 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE, SUITE 900
MIAMI, FL 33131 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/MANAGERS:

Title:	MGR	( ) Delete
Name:	DE ANGULO, JUAN FERNANDO	
Address:	7765 NW 48TH STREET, SUITE 300	
City-St-Zip:	MIAMI, FL 33166	
Title:	MGRM	( ) Delete
Name:	DE ANGULO, JUAN ROBERTO	
Address:	7765 NW 48TH STREET, SUITE 300	
City-St-Zip:	MIAMI, FL 33166	
Title:	MGRM	( ) Delete
Name:	DE ANGULO, CARLOS FERNAND	
Address:	7765 NW 48TH STREET, SUITE 300	
City-St-Zip:	MIAMI, FL 33166	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 exemption stated in Chapter 119, 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: JUAN F. DEANGULO MGR 04/30/2007

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