

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000028875

FILED
Apr 28, 2006
Secretary of State

Entity Name: GOPICUR, LLC

Current Principal Place of Business:

10800 BISCAYNE BLVD., STE 988
MIAMI, FL 33161

New Principal Place of Business:

1110 BRICKELL AVE, SUITE 310
MIAMI, FL 33131

Current Mailing Address:

10800 BISCAYNE BLVD., STE 988
MIAMI, FL 33161

New Mailing Address:

1110 BRICKELL AVE, SUITE 310
MIAMI, FL 33131

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

Name and Address of Current Registered Agent:

PORNPRINYA, TONY
10800 BISCAYNE BLVD. STE 988
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

SERVICE INC, NS CORPORATE
1110 BRICKELL AVE, SUITE 310
MIAMI, FL 33131 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: NS CORPORATE SERVICES INC.

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOSE MARIA PINHO,
Address: 9999 COLLINS AVENUE, APT. 12 F
City-St-Zip: MIAMI BEACH, FL 33154

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOSE MARIA PINHO,
Address: 1110 BRICKELL AVE, SUITE 310
City-St-Zip: MIAMI, FL 33131

Title: MGR () Change (X) Addition
Name: PEREIRA, JOAO GOMES
Address: 1110 BRICKELL AVE, SUITE 310
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSE PINHO

MGR

04/28/2006

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