2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 09, 2005
Secretary of State

DOCUMENT# L04000034492

Entity Name: VNET INTERNATIONAL, LLC

Current Principal Place of Business:

5750 COLLINS AVE
APT 10-B
MIAMI BEACH, FL 33140

New Principal Place of Business:

2550 NW 72 AVE
307
MIAMI, FL 33122

Current Mailing Address:

5750 COLLINS AVE
APT 10-B
MIAMI BEACH, FL 33140

New Mailing Address:

2550 NW 72 AVE
307
MIAMI, FL 33122

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

BOLANOS, JOSE A
2121 PONCE DE LEON BLVD
SUITE 600
CORAL GABLES, FL 33134 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: MENCHACA, ANTONIO M
Address: 5750 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33140

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

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MENCHACA, ANTONIO M
Address: 2550 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

Title: MGR ( ) Change (X) Addition
Name: GOIC, FRANCISCO J
Address: 2550 NW 72 AVE
City-St-Zip: MIAMI, FL 33122

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: FRANCISCO J GOI MGR 09/09/2005

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