2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037329

Entity Name: REAL TRANSFER LLC

FILED Feb 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10967 LAS SALINAS CIRCLE 593 EAST SAMPLE ROAD

BOCA RATON, FL 33482 US POMPANO BEACH, FL 33064 US

Current Mailing Address: New Mailing Address:

10967 LAS SALINAS CIRCLE 593 EAST SAMPLE ROAD BOCA RATON, FL 33482 US POMPANO BEACH, FL 33064 US

FEI Number: 80-0108088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARA EBERT CAMERON PA 2929 EAST COMMERCIAL BLVD. SUITE 410

FORT LAUDERDALE, FL 33308 US

CLAUDIA SILVA 10967 LA SALINAS CIRCLE BOCA RATON, FL 33428 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: CLAUDIA SILVA 02/15/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SILVA, CLAUDIA G
 Name:

 Address:
 10967 LAS SALINAS CIRCLE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SILVA, PAULO F
 Name:

 Address:
 10976 LAS SALINAS CIRCLE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428 US
 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: CLAUDIA SILVA MGRM 02/15/2005