2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# L04000048213

Entity Name: NORTH ROADS GROUP, LLC

Current Principal Place of Business:

9560 SW 107TH AVE
SUITE 102
MIAMI, FL 33173

New Principal Place of Business:

10511 NORTH KENDALL DRIVE
SUITE C 205
MIAMI, FL 33176

Current Mailing Address:

P.O. BOX 520682
MIAMI, FL 33173

New Mailing Address:

FEI Number: 54-2156149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACHADO, LUIS
9560 SW 107TH AVE
SUITE 102
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

MACHADO, LUIS
10511 NORTH KENDALL DRIVE
SUITE C 205
MIAMI, FL 33176 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: _____ 04/18/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MACHADO, LUIS
Address: PO BOX 520682
City-St-Zip: MIAMI, FL 331520682

Title: MGR ( ) Delete
Name: PADRON, RALPH JR
Address: PO BOX 520682
City-St-Zip: MIAMI, FL 331520682

Title: MGR ( ) Delete
Name: ALOS, ANDRES F
Address: PO BOX 520682
City-St-Zip: MIAMI, FL 331520682

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 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: LUIS MACHADO MGR 04/18/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date