

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000052110

**FILED  
Apr 30, 2007  
Secretary of State**

**Entity Name:** GID 2, LLC

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD., SUITE 1035  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2480 LINCOLN AVE  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:** 20-4129307      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RODRIGUEZ, ROBERT W ESQ.  
2121 PONCE DE LEON BLVD., SUITE 1035  
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:** MGRM      ( ) Delete  
**Name:** RODRIGUEZ, ROBERT  
**Address:** 2121 PONCE DE LEON BLVD, SUITE 1035  
**City-St-Zip:** CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

**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: ROBERT RODRIGUEZ      D      04/30/2007

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