


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 20, 2006 8:00 am**  
**Secretary of State**

04-20-2006 90036 045 \*\*\*\*50.00

**DOCUMENT # L04000056128**

1. Entity Name  
 HEXAGON CAPITAL, LLC



Principal Place of Business 1425 SOUTH KIRKMAN ROAD 2032 ORLANDO, FL 32811	Mailing Address 1425 SOUTH KIRKMAN ROAD 2032 ORLANDO, FL 32811
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**DO NOT WRITE IN THIS SPACE**



03152006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1461781	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

NOWEZ, RODRIGO A  
 1425 SOUTH KIRKMAN ROAD  
 2032  
 ORLANDO, FL 32811

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NUNEZ, RODRIGO A 1425 SOUTH KIRKMAN ROAD #2032 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	* Please Change Address to:
TITLE NAME STREET ADDRESS CITY-ST-ZIP	816 Renaissance Point #301 Altamonte - Springs - FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	32714 *
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 authorized trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE [Signature] RODRIGO A NUNEZ Date 3/15/06 Daytime Phone # 386 236 1201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE