## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000057184

Entity Name: MINAMAR INVESTMENT LLC

FILED Apr 08, 2008 Secretary of State

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

9737 NW 41 ST #615

MIAMI, FL 33178 US

Current Mailing Address: New Mailing Address:

9737 NW 41 ST 10520 NW 26TH ST. #615 #C201

MIAMI, FL 33178 US DORAL, FL 33178 US

FEI Number: 20-1444503 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:

CABANAS & ASSOCIATES, P.A. 10520 NW 26 ST SUITE C 201 DORAL, FL 33172 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:

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITION

## ADDITIONS/CHANGES:

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

 Name:
 MICELLI, ALSO
 Name:
 MICELLI, ALDO

 Address:
 10556 NW 26 ST., SUITE D101
 Address:
 10556 NW 26 ST., SUITE D101

 City-St-Zip:
 DORAL, FL 33172 US
 City-St-Zip:
 DORAL, FL 33172 US

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

 Name:
 DE MICELLI, MARIA M
 Name:

 Address:
 10556 NW 26 ST., SUITE D101
 Address:

 City-St-Zip:
 DORAL, FL 33172 US
 City-St-Zip:

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

 Name:
 LAVANGA, GIOVANNI
 Name:

 Address:
 10556 NW 26 ST., SUITE D101
 Address:

 City-St-Zip:
 DORAL, FL 33172 US
 City-St-Zip:

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

 Name:
 DE LAVANGA, MARIA I
 Name:

 Address:
 10556 NW 26 ST., SUITE D101
 Address:

 City-St-Zip:
 DORAL, FL 33172 US
 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: ALDO MICELLI MGRM 04/08/2008