


**FILED**  
**Aug 23, 2005 8:00 am**  
**Secretary of State**

08-23-2005 90094 015 \*\*\*\*50.00

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

<b>DOCUMENT # L04000063549</b>					
1. Entity Name <b>MARCAFABRICA, LLC</b>					
Principal Place of Business <b>ONE SOUTHEAST 3RD AVENUE, 28TH FLOOR MIAMI, FL 33131</b>			Mailing Address <b>ONE SOUTHEAST 3RD AVENUE, 28TH FLOOR MIAMI, FL 33131</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	07272005 Chg-LLC CR2E083 (10/03)	
4. FEI Number <b>90-0194066</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>AMERICAN INFORMATION SERVICES, INC. ONE SOUTHEAST 3RD AVENUE, 28TH FLOOR MIAMI, FL 33131</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b> Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____					
<b>Filing Fee is \$50.00 Due by September 7, 2005</b>				<b>Make check payable to Florida Department of State</b>	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MANAGER VISH CANARAN 21200 NE 38TH AVENUE, SUITE 2402 AVENTURA, FLORIDA 33180 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Vish Canaran</u> / VISH CANARAN			8/8/2005		904.412.475
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date</small>		<small>Daytime Phone #</small>

ATTACHMENT

20067070

#L04000063549

Fort Lauderdale  
Jacksonville  
Miami  
Orlando  
Tallahassee  
Tampa  
Washington, DC  
West Palm Beach

**Akerman Senterfitt**  
ATTORNEYS AT LAW

One Southeast Third Avenue  
SunTrust International Center  
28th Floor  
Miami, Florida 33131-1714  
[www.akerman.com](http://www.akerman.com)  
305 374 5600 tel 305 374 5095 fax

August 17, 2005

**VIA U.S. MAIL**

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, Florida 32314

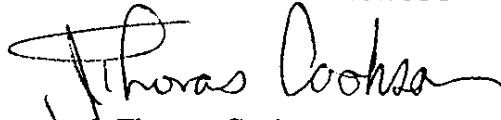
Dear Sir/Madam:

Enclosed for filing is the 2005 Limited Liability Company Annual Report for Marcafabrica, LLC, a Florida limited liability company. Also enclosed is a check for \$50.00 for the applicable filing fee.

Thank you very much for your assistance.

Very truly yours,

**AKERMAN SENTERFITT**

  
J. Thomas Cookson  
For the Firm

JTC:adg  
Enclosures