


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2005 8:00 am
Secretary of State

05-03-2005 90027 045 ****50.00

| | | | |
|--|---|---|---|
| DOCUMENT # L04000071085 | |  | |
| 1. Entity Name NXTUSA, LLC. | | | |
| Principal Place of Business 8307 SW 142 AVENUE, SUITE F105 MIAMI, FL 33183 | | Mailing Address 8307 SW 142 AVENUE, SUITE F105 MIAMI, FL 33183 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | 9010 SW 137th Ave. Suite 113 | |
| City & State | | City & State Miami, Fl. | |
| Zip | Country | Zip | Country |
| 33186 | | 33186 | U.S.A. |
| 4. FF1 Number 16-1707906 | | Applied For 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 | |
| GERMAN PENA P.A. 9010 SW 137 AVENUE, SUITE 113 MIAMI, FL 33186 | | Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 <i>German Pena</i> | | DATE | |
| Filing Fee is \$50.00 Due by May 1, 2005 | | Make check payable to Florida Department of State | |
| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR VELASCO, NESTOR A 8307 SW 142 AVENUE, SUITE F105 MIAMI, FL 33183 <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 |
| 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 recorder or professional empowered to execute this report as required by Chapter 606, Florida Statutes. | | | |
| SIGNATURE: <i>German Pena</i> | | Date | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE | | Date | |

30007522



04272005 Chg-LLC CR2E083 (10/03)

ATTACHMENT

30007522

LD4000071085

May 23, 2005

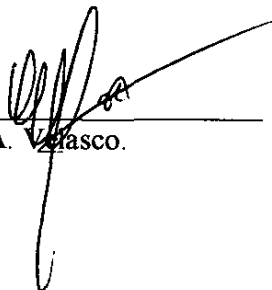
Division of Corporations
PO BOX 6478
Tallahassee, FL, 32314

Ref: Nestor A. Velasco
9010 SW 137th Ave.
Suite 113
Miami, FL, 33186

To whom it may concern:

I am writing this letter to inform you that the correction that needed to be made on Block four was already made.

Sincerely,



Nestor A. Velasco.