


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90225 032 ****50.00

DOCUMENT # L04000075906 1. Entity Name GALPA INVESTMENT LLC					
Principal Place of Business 1555 NW 97TH AVENUE MIAMI, FL 33172 US			Mailing Address 1555 NW 97TH AVENUE MIAMI, FL 33172 US		
2. Principal Place of Business 6000 NW 97 AVE.		3. Mailing Address 6000 NW. 97 AVE.			
Suite, Apt. #, etc. 11.		Suite, Apt. #, etc. 11.			
City & State DORAL, FLORIDA		City & State DORAL, FLORIDA		4. FEI Number 20-1859019	
Zip 33178		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HERNANDEZ, FRANCISCO 1555 NW 97TH AVENUE MIAMI, FL 33172		7. Name and Address of New Registered Agent Name HERNANDEZ, FRANCISCO Street Address (P.O. Box Number is Not Acceptable) 6000 NW 97 AVE, SUITE 11 City DORAL FL Zip Code 33178			
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 <u>FRANCISCO HERNANDEZ</u> DATE <u>01-09-2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HERNANDEZ, FRANCISCO 1555 NW 97TH AVENUE MIAMI, FL 33172	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GALARZA, ANA 1555 NW 97TH AVENUE MIAMI, FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GALARZA, MARIA G 1555 NW 97TH AVENUE MIAMI, FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GALARZA, JESUS 1555 NW 97TH AVENUE MIAMI, FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUIZ-ESQUIDE, LUIS 1555 NW 97TH AVENUE MIAMI, FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUIZ-ESQUIDE, LUIS 1555 NW 97TH AVENUE MIAMI, FL 33172	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>FRANCISCO HERNANDEZ</u> 01-09-2006 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

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01092006 Chg-LLC CR2E083 (11/05)

Applied For
Not Applicable