

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086584

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: MIAMI INVESTORS GROUP, LLC

**Current Principal Place of Business:**

7400 SW 48 ST  
MIAMI, FL 33135 US

**New Principal Place of Business:**

1332 WEST FLAGLER ST  
MIAMI, FL 33135 US

**Current Mailing Address:**

7400 SW 48 ST  
MIAMI, FL 33155 US

**New Mailing Address:**

1332 WEST FLAGLER ST  
MIAMI, FL 33135 US

FEI Number: 20-1951324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LABARTA, LYNN  
1332 WEST FLAGLER STREET  
MIAMI, FL 33135 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM ( ) Delete  
Name: LUIS, SILA  
Address: 7400 SW 48 ST  
City-St-Zip: MIAMI, FL 33155 US

Title: MGRM ( ) Delete  
Name: LUIS, WILFREDO  
Address: 7400 SW 48 ST  
City-St-Zip: MIAMI, FL 33155 US

Title: MGRM ( ) Delete  
Name: ZERON, FREDDY  
Address: 7400 SW 48 ST  
City-St-Zip: MIAMI, FL 33155 US

Title: MGRM ( ) Delete  
Name: ZERON, VIRGINIA  
Address: 9965 SW 31 TERRACE  
City-St-Zip: MIAMI, FL 33165 US

Title: MGRM ( ) Delete  
Name: LABARTA, LYNN  
Address: 1332 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33135 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LYNN LABARTA

MGRM

04/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date