

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088346

FILED
Jan 28, 2009
Secretary of State

Entity Name: THE JUGATA U.S.A. GROUP, L.L.C

Current Principal Place of Business:

522 WESTREE LANE
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

522 WESTREE LANE
PLANTATION, FL 33324 US

New Mailing Address:

FEI Number: 20-1985537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, GABRIEL
522 WESTREE LANE
PLANTATION, FL 33325 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: ONOFRE DE JIMENEZ, JEANNETTE M
Address: 522 WESTREE LANE
City-St-Zip: PLANTAION, FL 33325 US

Title: MGRM () Delete
Name: JIMENEZ ECHEVERRI, GABRIEL
Address: 522 WESTREE LANE
City-St-Zip: PLANTATION, FL 33325 US

Title: MGR () Delete
Name: JIMENEZ ONOFRE, JUANITA
Address: 522 WESTREE LANE
City-St-Zip: PLANTAION, FL 33325 US

Title: MGR () Delete
Name: JIMENEZ ONOFRE, CATALINA
Address: 522 WESTREE LANE
City-St-Zip: PLANTAION, FL 33325 US

Title: MGR () Delete
Name: JIMENEZ ONOFRE, GABRIEL
Address: 522 WESTREE LANR
City-St-Zip: PLANTATION, FL 33325

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ONOFRE DE JIMENEZ, JEANNETTE M
Address: 522 WESTREE LANE
City-St-Zip: PLANTAION, FL 33325 US

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: MGR (X) Change () Addition
Name: JIMENEZ ONOFRE, GABRIEL
Address: 522 WESTREE LANE
City-St-Zip: PLANTATION, FL 33325

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: GABRIEL JIMENEZ

MGRM

01/28/2009

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