2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# L05000003946

Entity Name: ARCA GROUP, LLC

Current Principal Place of Business:

1145 NW 3 RD ST
MIAMI, FL 33128

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 490423
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 76-0776555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TOBIN, MICHAEL S
11900 BISCAYNE BOULEVARD, SUITE 740
MIAMI, FL 33181 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: KAUPERT, MIGUEL
Address: P.O.BOX 490423
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM ( ) Delete
Name: KAUPERT, SILVIA
Address: POBOX 490423
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM ( ) Delete
Name: KAUPERT, GERMAN
Address: P.O.BOX 490423
City-St-Zip: KEY BISCAYNE, FL 33149

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:

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: SILVIA KAUPERT MGR 05/11/2009

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