

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010593

Entity Name: MACONDO TRADING, LLC

FILED
Feb 21, 2008
Secretary of State

Current Principal Place of Business:

2312 SW 25TH TERR
MIAMI, FL 33133

New Principal Place of Business:

8298 NW 68 STREET
MIAMI, FL 33166

Current Mailing Address:

2312 SW 25TH TERR
APT. 3C
MIAMI, FL 33133

New Mailing Address:

8298 NW 68 STREET
MIAMI, FL 33166

FEI Number: 20-2262674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES, ADRIANA
1455 NORTH TREASURE DR.
APT. 3C
NORTH BAY VILLAGE, FL 33141 US

Name and Address of New Registered Agent:

VALDES, ADRIANA
8298 NW 68 STREET
MIAMI, FL 33166 US

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:

02/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VALDES, ADRIANA
Address: 941 NE 82ND TERRACE
City-St-Zip: MIAMI, FL 33138

Title: MGR () Delete
Name: OLARTE, JOHANNA
Address: 941 NE 82ND TERRACE
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OLARTE, ADRIANA
Address: 8298 NW 68 STREET
City-St-Zip: MIAMI, FL 33166

Title: MGR (X) Change () Addition
Name: OLARTE, JOHANNA
Address: 8298 NW 68 STREET
City-St-Zip: MIAMI, FL 33166

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: ADRIANA OLARTE

MGR

02/21/2008

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