

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010679

FILED
Apr 26, 2006
Secretary of State

Entity Name: MONTALVO HOLDINGS, LLC.

Current Principal Place of Business:

2151 S LEJEUNE RD SUITE 305
CORAL GABLES, FL 33134

New Principal Place of Business:

66 WEST FLAGLER STREET 9TH FLOOR
MIAMI, FL 33131

Current Mailing Address:

2151 S LEJEUNE RD SUITE 305
CORAL GABLES, FL 33134

New Mailing Address:

66 WEST FLAGLER STREET 9TH FLOOR
MIAMI, Q 33131

FEI Number: 26-0113884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTALVO, ARMANDO
2151 S LEJEUNE RD SUITE 305
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MONTALVO, ARMANDO
66 WEST FLAGLER STREET 9TH FLOOR
MIAMI, FL 33131 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:

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MONTALVO, ARMANDO
Address: 66 WEST FLAGLER ST. 9TH FLOOR
City-St-Zip: MIAMI,, FL 33131

Title: MGR () Change (X) Addition
Name: MONTALVO, MIRIAM
Address: 66 WEST FLAGLER ST. 9TH FLOOR
City-St-Zip: MIAMI, FL 33131

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: ARMANDO MONTALVO

MGR

04/26/2006

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