

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026266

FILED
Jan 12, 2006
Secretary of State

Entity Name: OCEANA INTERNATIONAL, L.L.C.

Current Principal Place of Business:

20281 E. COUNTRY CLUB DR., #2108
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20281 E. COUNTRY CLUB DR., #2108
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-3158708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ.
TURNBERRY PLAZA, SUITE 801
2875 N.E. 191ST STREET
AVENTURA, FL 33180 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: () Delete
Name:
Address:
City-St-Zip:

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

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

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: MARCOS, ACKERMAN
Address: 20281 E. COUNTRY CLUB DR. APT. 2108
City-St-Zip: AVENTURA, FL 33180

Title: VP () Change (X) Addition
Name: ACKERMAN, ARMINDA
Address: 20281 E. COUNTRY CLUB DR. APT. 2108
City-St-Zip: AVENTURA, FL 33180

Title: S () Change (X) Addition
Name: ACKERMAN, JOE
Address: 20281 E. COUNTRY CLUB DR. APT.. 2108
City-St-Zip: AVENTURA, FL 33180

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: MARCOS ACKERMAN

P

01/12/2006

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