2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2006
Secretary of State

DOCUMENT# L05000028628

Entity Name: PUERTO OFFICE IMP&DIST LLC

Current Principal Place of Business:

6600 PONDAPPLE RD
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

6600 PONDAPPLE RD
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLIVEROS, HECTOR
6600 PONDAPPLE RD
BOCA RATON, FL 33433 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: PTE ( ) Delete
Name: OLIVEROS, HECTOR
Address: 6600 PONDAPPLE RD
City-St-Zip: BOCA RATON, FL 33433

Title: VP ( ) Delete
Name: LAJER, SERGIO
Address: 900 ST CHARLES PL L103
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP M ( ) Delete
Name: SROLOVICH, ENRIQUE
Address: 900 ST CHARLES PL L103
City-St-Zip: PEMBROKE PINES, FL 33026

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 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: HECTOR OLIVEROS PRES 02/12/2006

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