2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2006
Secretary of State

DOCUMENT# L05000029293

Entity Name: ICONA INVESTMENTS LLC

Current Principal Place of Business:

2121 PONCE DE LEON, SUITE 330
CORAL GABLES, FL 33134

New Principal Place of Business:

940 LINCOLN ROAD
204
MIAMI BEACH, FL 33139

Current Mailing Address:

2121 PONCE DE LEON, SUITE 330
CORAL GABLES, FL 33134

New Mailing Address:

940 LINCOLN ROAD
204
MIAMI BEACH, FL 33139

FEI Number: 20-2717434 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ORTIZ, MICHAEL ESQ
2121 PONCE DE LEON, SUITE 330
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MATHEOU, MATHEOS
940 LINCOLN ROAD
204
MIAMI BEACH, FL 33139 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: MATHEOS MATHEOU 03/20/2006
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: MATHEOU, MATHEOS
Address: 940 LINCOLN ROAD STE. 204
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRS ( ) Change (X) Addition
Name: CHARALAMBOUS, PANTELAKIS
Address: 940 LINCOLN ROAD STE. 204
City-St-Zip: MIAMI BEACH, FL 33139

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: MATHEOS MATHEOU MGR 03/20/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date