

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033015

FILED  
Jul 14, 2008  
Secretary of State

Entity Name: TUVI, L.L.C.

**Current Principal Place of Business:**

TURNBERRY PLAZA, STE. 801  
2875 N.E. 191ST STREET  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

TURNBERRY PLAZA, STE. 801  
2875 N.E. 191ST STREET  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SERBER, DANIEL J ESQ  
TURNBERRY PLAZA, STE. 801  
2875 N.E. 191ST STREET  
AVENTURA, FL 33180 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MM ( ) Delete  
Name: SMULEVICH, PABLO  
Address: 19423 NE 17TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MM ( ) Delete  
Name: SMULEVICH, FERNANDO  
Address: 19423 NE 17TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MM ( ) Delete  
Name: SLELATT, ISAAC  
Address: 19423 NE 17TH AVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PABLO SMULEVICH

MM

07/14/2008

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