

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039778

FILED
Sep 07, 2006
Secretary of State

Entity Name: BLAX PHARMACEUTICALS, LLC

Current Principal Place of Business:

8007 29 STREET
MIAMI, FL 33122

New Principal Place of Business:

1600 NW 108 AVE
MIAMI, FL 33172

Current Mailing Address:

8007 29 STREET
MIAMI, FL 33122

New Mailing Address:

1600 NW 108 AVE
MIAMI, FL 33172

FEI Number: 20-2744384 FEI Number Applied For () FEI Number Not Applicable () 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:

ROZENCWAIG & FERRERO-CARR
301 W. HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009 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: MGR () Delete
Name: AIZPURUA, MIKEL
Address: 8007 29 STREET
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: TURSI, MIREN J
Address: 8007 29 STREET
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: AIZPURUA, XABIER
Address: 8007 29 STREET
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: BENEDETTO, BLAS A
Address: 8007 29 STREET
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AIZPURUA, MIKEL
Address: 1600 NW 108 AVE
City-St-Zip: MIAMI, FL 33172

Title: MGR (X) Change () Addition
Name: TURSI, MIREN J
Address: 1600 NW 108 AVE
City-St-Zip: MIAMI, FL 33172

Title: MGR (X) Change () Addition
Name: AIZPURUA, XABIER
Address: 1600 NW 108 AVE
City-St-Zip: MIAMI, FL 33172

Title: MGR (X) Change () Addition
Name: BENEDETTO, BLAS A
Address: 1600 NW 108 AVE
City-St-Zip: MIAMI, FL 33172

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: MIKEL AIZPURUA

MR

09/07/2006

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