

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045196

FILED  
Jul 13, 2007  
Secretary of State

Entity Name: ETRANS LC

## Current Principal Place of Business:

2859 COCONUT AVENUE  
MIAMI, FL 33133 US

## New Principal Place of Business:

## Current Mailing Address:

2859 COCONUT AVENUE  
MIAMI, FL 33133 US

## New Mailing Address:

FEI Number: 20-4212196      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:

COMAS, ALBERT  
2859 COCONUT AVENUE  
MIAMI, FL 33133 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: COMAS, ALBERT  
Address: 2859 COCONUT AVENUE  
City-St-Zip: MIAMI, FL 33133 US

Title: MGR ( ) Delete  
Name: ALONSO, PEDRO  
Address: 2859 COCONUT AVENUE  
City-St-Zip: MIAMI, FL 33133 US

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

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

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

## ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition  
Name: ALONSO, PEDRO  
Address: DOCTOR CERRADA 7  
City-St-Zip: ZARAGOZA, XX SPAIN XX

Title: MGR ( ) Change (X) Addition  
Name: BAS, JOSE IGNACIO  
Address: FRANCISCO VITORIA 31  
City-St-Zip: ZARAGOZA, XX SPAIN XX

Title: MGR ( ) Change (X) Addition  
Name: BAS, FRANCISCO  
Address: PASEO DE ROSALES 8  
City-St-Zip: ZARAGOZA, XX SPAIN XX

Title: MGR ( ) Change (X) Addition  
Name: BAS, FERNANDO  
Address: SANGENIS 60  
City-St-Zip: ZARAGOZA, XX SPAIN XX

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: ALBERT COMAS

MGR

07/13/2007

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