

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059295

Entity Name: INTERCAMBIO LLC

FILED
May 19, 2006
Secretary of State

Current Principal Place of Business:

3785 N.W. 82ND AVE., SUITE 208
MIAMI, FL 33166

New Principal Place of Business:

3785 N.W. 82ND AVE.
SUITE 212
MIAMI, FL 33166 US

Current Mailing Address:

3785 N.W. 82ND AVE., SUITE 208
MIAMI, FL 33166

New Mailing Address:

3785 N.W. 82ND AVE.
SUITE 212
MIAMI, FL 33166 US

FEI Number: FEI Number Applied For (X) 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:

ROTOLO, ALBERTO
3785 N.W. 82ND AVE., SUITE 208
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

VIZCARRONDO, ALFREDO
3785 N.W. 82ND AVE.
SUITE 212
MIAMI, FL 33166 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: ALFREDO VIZCARRONDO

05/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VIZCARRONDO, ALFREDO E
Address: 3785 N.W. 82ND AVE., SUITE 208
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VIZCARRONDO, ALFREDO
Address: 3785 N.W. 82ND AVE. SUITE 212
City-St-Zip: MIAMI, FL 33166

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: ALFREDO VIZCARRONDO

MGRM

05/19/2006

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