

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064941

FILED
Apr 14, 2008
Secretary of State

Entity Name: NUKAK TECHNOLOGIES, LLC.

Current Principal Place of Business:

3150 NE 190 ST
304
AVENTURA, FL 33180 US

Current Mailing Address:

3150 NE 190 ST
304
AVENTURA, FL 33180 US

New Principal Place of Business:

3330 NE 190 ST
1216
AVENTURA, FL 33180 US

New Mailing Address:

3330 NE 190 ST
1216
AVENTURA, FL 33180 US

FEI Number: 20-3185385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, LEONARDO A ESQ.
18851 NE 29TH AVENUE
STE 900
AVENTURA, FL 33180 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: RODRIGUEZ PENA, JORGE HERNAN
Address: 3150 NE 190 ST #304
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR () Delete
Name: MEDINA, ADRIANA GUZMAN
Address: 3150 NE 190 ST #304
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RODRIGUEZ PENA, JORGE HERNAN
Address: 3330 NE 190 ST
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR (X) Change () Addition
Name: MEDINA, ADRIANA GUZMAN
Address: 3330 NE 190 ST
City-St-Zip: AVENTURA, FL 33180 US

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: JORGE HERNAN RODRIGUEZ

MGR

04/14/2008

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