

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069338

Entity Name: NUKLEI.COM, LLC

FILED
May 31, 2006
Secretary of State

Current Principal Place of Business:

16899 S.W. 92 STREET
MIAMI, FL 33196

New Principal Place of Business:

Current Mailing Address:

16899 S.W. 92 STREET
MIAMI, FL 33196

New Mailing Address:

FEI Number: 55-0905340 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:

CAPOTE, JULIO
16899 S.W. 92 STREET
MIAMI, FL 33196 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: CAPOTE, JULIO
Address: 16899 S.W. 92 STREET
City-St-Zip: MIAMI, FL 33196

Title: MGR () Delete
Name: CRUZ, GABRIELLA
Address: 16899 S.W. 92 STREET
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: CAPOTE, JULIO
Address: 16899 S.W. 92 STREET
City-St-Zip: MIAMI, FL 33196

Title: VP (X) Change () Addition
Name: CRUZ, GABRIELLA
Address: 16899 S.W. 92 STREET
City-St-Zip: MIAMI, FL 33196

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: JULIO CAPOTE

P

05/31/2006

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