

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000088237

Entity Name: MENUGAL, LLC

FILED
Apr 01, 2008
Secretary of State

Current Principal Place of Business:

CALLE 72 A # 1-20
APT. 401
BOGOTA, . COLOMBIA

New Principal Place of Business:

Current Mailing Address:

5805 BLUE LAGOON DR
SUITE 200
MIAMI, FL 33126

New Mailing Address:

FEI Number: 20-3549157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DR
SUITE 200
MIAMI, FL 33126 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: GALOFRE, PAULA
Address: CALLE 72 A # 1-20, APT. 401
City-St-Zip: BOGOTA, . COLOMBIA

Title: MGR () Delete
Name: MENDOZA, RINA C
Address: CALLE 72 A # 1-20, APT. 401
City-St-Zip: BOGOTA, . COLOMBIA

Title: MGR () Delete
Name: NULE, VIVIANA
Address: CALLE 72 A # 1-20, APT. 401
City-St-Zip: BOGOTA, . COLOMBIA

ADDITIONS/CHANGES:

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

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

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

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: GALOFRE, PAULA

MGR

04/01/2008

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