2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# L05000088583

Entity Name: LEGATIEN UNICA, LLC

Current Principal Place of Business:

18851 NE 29TH AVENUE, STE 900
AVENTURA, FL 33180

New Principal Place of Business:

18851 NE 29TH AVENUE
SUITE 900
AVENTURA, FL 33180

Current Mailing Address:

18851 NE 29TH AVENUE, STE 900
AVENTURA, FL 33180

New Mailing Address:

18851 NE 29TH AVENUE
SUITE 900
AVENTURA, FL 33180

FEI Number: 20-3466430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROUSSO, MARK E ESQ
18851 NE 29TH AVENUE, SUITE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

ROUSSO, MARK E ESQ
18851 NE 29TH AVENUE
SUITE 900
AVENTURA, FL 33180 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: MARK E ROUSSO 04/28/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ROUSSO, MARK E
Address: 18851 NE 29TH AVENUE, STE 900
City-St-Zip: AVENTURA, FL 33180

Title: MGR ( ) Delete
Name: HORIGIAN, FERNANDO
Address: 18851 NE 29TH AVENUE, STE 900
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

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 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: MARK E ROUSSO MGR 04/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date