

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State

07-21-2006 90082 042 ****50.00

DOCUMENT # L05000102568			
1. Entity Name INTERCELL, LLC		Principal Place of Business 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178	
Mailing Address 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178		2. Principal Place of Business 8335 NW 68 ST Suite, Apt. #, etc.	
3. Mailing Address 8335 NW 68 ST Suite, Apt. #, etc.		4. FEI Number 20-3712467	
City & State MIAMI FLORIDA		City & State MIAMI, FL	
Zip 33166		Country USA	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent VILLEGAS, ERWIN JOSE 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178		7. Name and Address of New Registered Agent Name: <u>Villegas, Erwin Jose</u> Street Address (P.O. Box Number is Not Acceptable): <u>8335 NW 68 ST.</u> City: <u>MIAMI</u> <u>FL</u> Zip Code: <u>33166</u>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: _____ DATE: <u>4/28/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FUGUET, JOSE ANTONIO 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VILLEGAS, ERWIN JOSE 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR IBANEZ, XAVIER 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178 <div style="text-align: right;"><input checked="" type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR IBANEZ, JUAN FRANCISCO 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178 <div style="text-align: right;"><input checked="" type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LUGO, TRINO JOSE 10100 NW 116TH WAY STE 14 MEDLEY, FL 33178 <div style="text-align: right;"><input checked="" type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date: <u>4/28/06</u> (305) 513-3958 <small>Daytime Phone #</small>	