

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103380

Entity Name: CIMADE GROUP, L.L.C.

FILED
Jul 10, 2008
Secretary of State

Current Principal Place of Business:

8500 W. FLAGLER STREET, B-208
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8500 W. FLAGLER STREET, B-208
MIAMI, FL 33144

New Mailing Address:

FEI Number: 20-3660902 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:

RIOS, MARIO
8500 W. FLAGLER STREET, B-208
MIAMI, FL 33144 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: CIMADEVILLA, JOSE
Address: 8500 W. FLAGLER STREET, B-208
City-St-Zip: MIAMI, FL 33144

Title: MGR () Delete
Name: CAICEDO, MARIA E
Address: 8500 W. FLAGLER STREET, B-208
City-St-Zip: MIAMI, FL 33144

Title: MGR () Delete
Name: CIMADEVILLA, MANUEL J
Address: 8500 W FLAGLER STREET, B-208
City-St-Zip: MIAMI, FL 33144

Title: MGR () Delete
Name: CIMADEVILLA, JORGE H
Address: 8500 W FLAGLER STREET, B-208
City-St-Zip: MIAMI, FL 33144

Title: MGR () Delete
Name: CIMADEVILLA, MARIA DEL PILA
Address: 8500 W FLAGLER STREET, B208
City-St-Zip: MIAMI, FL 33144

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:

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: JOSE CIMADEVILLA

MGR

07/10/2008

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