2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# L06000006950

Entity Name: SHIMARANA, LLC

Current Principal Place of Business:

C/O ERNESTO SANCHEZ, P.A.
815 PONCE DE LEON BLVD., STE. 306
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

C/O ERNESTO SANCHEZ, P.A.
815 PONCE DE LEON BLVD., STE. 306
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-4154303 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ERNESTO SANCHEZ, P.A.
815 PONCE DE LEON BLVD.
SUITE 306
CORAL GABLES, FL 33134 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: P ( ) Delete
Name: GIMENEZ, OSCAR E
Address: ERNESTO SANCHEZ, P.A., 815 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134

Title: VP ( ) Delete
Name: SCHIARTI, MARIA E
Address: ERNESTO SANCHEZ, P.A., 815 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134

Title: VPS ( ) Delete
Name: GIMENEZ, VICTORIA
Address: ERNESTO SANCHEZ, P.A , 815 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition
Name: GIMENEZ, OSCAR E
Address: C/O 815 PONCE DE LEON BLVD. #306
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change ( ) Addition
Name: SCHIARTI, MARIA E
Address: C/O 815 PONCE DE LEON BLVD. #306
City-St-Zip: CORAL GABLES, FL 33134

Title: VPS (X) Change ( ) Addition
Name: GIMENEZ, VICTORIA
Address: C/O 815 PONCE DE LEON BLVD. #306
City-St-Zip: CORAL GABLES, FL 33134

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: BY ERNESTO SANCHEZ, REGISTERED AGENT ESQ. 04/24/2008

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