

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000013000

Entity Name: KURARE 2000, LLC.

FILED  
Jan 23, 2008  
Secretary of State

## Current Principal Place of Business:

4011 WEST FLAGLER ST  
SUITE # 403  
MIAMI, FL 33134 US

## Current Mailing Address:

4011 WEST FLAGLER ST  
SUITE # 403  
MIAMI, FL 33134 US

## New Principal Place of Business:

7800 NW 25 STREET  
#15  
MIAMI, FL 33122 US

## New Mailing Address:

7800 NW 25 STREET  
#15  
MIAMI, FL 33122 US

FEI Number: 20-4254711

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALLNER, MARCOS  
4011 W. FLAGLER ST  
SUITE # 403  
MIAMI, FL 33134 US

## Name and Address of New Registered Agent:

WALLNER, MARCOS  
7800 NW 25 STREET  
#15  
MIAMI, FL 33122 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:

01/23/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: WALLNER, MARCOS  
Address: 4011 WEST FLAGLER ST SUITE # 403  
City-St-Zip: MIAMI, FL 33134 US

Title: MGRM ( ) Delete  
Name: CEBALLOS, CECILIA  
Address: 4011 WEST FLAGLER ST SUITE # 403  
City-St-Zip: MIAMI, FL 33134 US

Title: MGR (X) Delete  
Name: ANGILELLO, LUIGI  
Address: 17500 NW 67TH COURTH APT # J  
City-St-Zip: HIALEAH, FL 33015

Title: MGRM (X) Delete  
Name: MATOS, LUIS  
Address: 5600 NW 114 PLACE, APT. 206  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM (X) Delete  
Name: WERNER, PATRICIA  
Address: 5600 NW 114 PLACE APT 206  
City-St-Zip: DORAL, FL 33178 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WALLNER, MARCOS  
Address: 7800 NW 25 STREET  
City-St-Zip: MIAMI, FL 33122 US

Title: MGR (X) Change ( ) Addition  
Name: CEBALLOS, CECILIA  
Address: 7800 SW 25 STREET #15  
City-St-Zip: MIAMI, FL 33122 US

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: MARCOS WALLNER

MGRM

01/23/2008

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