2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: EZEQUIEL RUIZ R. SKINATURE AND TYPED OR PRINTED HAME OF SIGNE

FILED May 21, 2007 8:00 am Secretary of State

DOCUMENT # L06000019265 1. Entity Name CHANDELIER LLC						04-26-20	007 90044 019 * [*] 	***50.00
Principal Piace of Business Mailing Address CALLE AQUILINO DE LA GUARDIA, NO. B 701 BRICKELL AVENUE, SUITE 3000 IGRA BUILDING, 2ND FLOOR MIAMI, FL 33131 PANAMA, REPUBLIC OF PANAMA, OC					 	# 18 18	M BEKER HEID ISKO HOLD BURL B	NOTE IN 1881
2. Principal P	tace of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. *, etc.			03142007	Chg-LLC	CR2E083 (12/06)	
City & Stat	Ð	City & State		4. FEI Numi NONE	REQUIRED	/	oplied For of Applicable	
Zip	Country	Zip	Count		5. Certificat	e of Status Desired	S5.00 Add Fee Require	
	Name and Address of Current F	legistered Agent		ļ	7. Name an	d Address of New R	egistered Agent	
				Name -				
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVENUE, SUITE 3000 MIAMI, FL 33131				Street Address (P.O. Box Number is Not Acceptable)				
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				TL TTTT				
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 Signature, typed or printed name of repetitived agent and bife if applicable. (NOTE: Registered Agent signature required when renastating) DATE								
Filing Fee is \$50.00 Due by May 1, 2007							e check payable to Department of State	•
9.	MANAGING MEMBERS/MANAGERS					ADDITIONS/	CHANGES	
MIE			រោប				☐ Change	Addition
NAME	RUIZ, EZEQUIEL	NAME OCCUPANT		· 1				
STREET ADDRESS	PANAMA, REPUBLIC OF PANAM	IA,		ET ADDRESS -ST-21P		· ··		_
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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 repon is true and accurate and that my signature shall have the same legal effect as if made under each; 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.								