

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030776

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: POSSITIVA INVESTMENTS, LLC

## Current Principal Place of Business:

CRA 14 # 93 B 32  
508  
BOGOTA, . COLOMBIA

## New Principal Place of Business:

CALLE 88 NO 6 - 33  
APTO 503  
BOGOTA, . COLOMBIA

## Current Mailing Address:

5805 BLUE LAGON DRIVE  
200  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 98-0488861      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AG CORPORATE SERVICES LLC  
5805 BLUE LAGOON DR  
200  
MIAMI, FL 33126 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: WILLS, ROBERTO  
Address: CRA 14 # 93 B 32 OF 508  
City-St-Zip: BOGOTA, . COLOMBIA

Title: MGR ( ) Delete  
Name: WILLS LONDONO, MARIA  
Address: CRA 14 # 93 B 32 OF 508  
City-St-Zip: BOGOTA, . COLOMBIA

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WILLS, ROBERTO  
Address: CALLE 88 NO 6 - 33, APTO 503  
City-St-Zip: BOGOTA, . COLOMBIA

Title: MGR (X) Change ( ) Addition  
Name: WILLS LONDONO, MARIA  
Address: CALLE 88 NO 6 - 33, APTO 503  
City-St-Zip: BOGOTA, . COLOMBIA

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: ROBERTO WILLS

MGR

04/15/2008

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