

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031081

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: DISTRIBUIDORA ANIMATRIX'S, LLC

**Current Principal Place of Business:**

1900 SW 81ST AVE APT 213  
NORTH LAUDERDALE, FL 330684756

**New Principal Place of Business:**

8153 NW 107 PATH  
MIAMI, FL 33178

**Current Mailing Address:**

1900 SW 81ST AVE APT 213  
NORTH LAUDERDALE, FL 330684756

**New Mailing Address:**

8153 NW 107 PATH  
MIAMI, FL 33178

FEI Number: 20-5906713

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORREIA, JUAN CARLOS  
1900 SW 81ST AVE APT 213  
NORTH LAUDERDALE, FL 330684756 US

**Name and Address of New Registered Agent:**

CORREIA, JUAN CARLOS  
8153NW 107 PATH  
MIAMI, FL 33178 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: JUAN CARLOS CORREIA

01/10/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CORREIA, JUAN CARLOS  
Address: 1900 SW 81ST AVE APT 213  
City-St-Zip: NORTH LAUDERDALE, FL 330684756

Title: MGRM ( ) Delete  
Name: PENA MONTILLA, DAVID SAMUEL  
Address: 1900 SW 81ST AVE APT 213  
City-St-Zip: NORTH LAUDERDALE, FL 330684756

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CORREIA, JUAN CARLOS  
Address: 8153 NW 107 PATH  
City-St-Zip: MIAMI, FL 33178

Title: MGRM (X) Change ( ) Addition  
Name: PENA MONTILLA, DAVID SAMUEL  
Address: 8153 NW 107 PATH  
City-St-Zip: MIAMI, FL 33178

Title: MGRM ( ) Change (X) Addition  
Name: MATOS, NINOSKA  
Address: 8153 NW 107 PATH  
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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: NINOSKA MATOS

MGRM

01/10/2007

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