2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

	2007 LIMITED LIABILITY COMPANY ANNUAL REPORT					FILED Apr 30, 2007 8:00 am Secretary of State		
13060 SW 88 LANE MAME FL 33186 13060 SW 88 LANE MAME FL 33186 2. Principal Place of Business - No PO. Box # 1. Mailing Address 3utc. Apt. & dc. Sutc. Apt. & dc. 20 - Coverty Sutc. Apt. & dc. 20 - Coverty 2. Coverty 20 - Coverty 3. Coverty 20 - Coverty 2. Coverty <td colspan="5">1. Entity Name</td> <td></td> <td></td> <td></td>	1. Entity Name							
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Zip Country Zip Country S. Centificate of Status Desind E. For Regulational Address of Current Registered Agent I. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent OLIVERA, LUIZ C Strict Address (P.O.: Box Number is Not Acceptative) Name MIAMI, FL 33186 City FL Zip Code B. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Porida. 1 an Tambar with, and accept her of light data agent. Otter Registered agent, or both, in the State of Porida. 1 an Tambar with, and accept for the obligations of registered agent. SIGNATURE Tilling Fee is \$50.00 Merke check payable to Fielded Begartment of at light class of the light class. Note: Marke Class Reproductions of registered Agent 4 gent data in material Data SIGNATURE Marke Class Reproductions of registered Agent 4 gent data in material Data SIGNATURE Marke Class Reproductions of registered Agent 4 gent data in material Data SIGNATURE Marke Class Reproductions of registered Agent 4 gent data in material Data SIGNATURE Marke Class Reproductions of registered Agent 4 gent data in material Data SIGNATURE Marke Class Reproductions of registered Agent 4 gent data in material Data SIGNATURE Marke Classte	Suite, Apt. #, etc.		Suite, Apt. #, etc.					
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OLIVEIRA_LUIZ C Name 130600 SW 68 LANE Striet Address (P.O. Box Number is Not Acceptable) City FL Zip Code B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Roids. I am familiar with, and accept the obligations of registered agent. Striet Address (P.O. Box Number is Not Acceptable) SIGNATURE The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Roids. I am familiar with, and accept the obligations for egistered agent, or both, in the State of Roids. I am familiar with, and accept the obligations for egistered agent, or both, in the State of Roids. I am familiar with, and accept the obligations for egistered agent. SIGNATURE Telentar for a gent agent of the faultable. COTE: Registered agent, or both, in the State of Roids. I am familiar with, and accept the obligation for a gent agent of the faultable. SIGNATURE Telentar for a gent agent of the faultable. COTE: Registered agent, or both, in the State of Roids. I am familiar with, and accept the obligation for a gent agent of the faultable. SIGNATURE MCRM OLIVEIRA, LUIZ C Detect MARK OLIVEIRA, LUIZ C Detect Not SIGNATURE Int K Addien Change Addien Now MCRM Int K OLIVEIRA ADDITIONS (CHANGES Change	Zip	Country	Zip	Coun	itry	5. Certificat	te of Status Desired X \$5.00 Additional Fee Required	
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SIGNATURE: 4127107 (786)556 9181 BIGNATURE AND TYPED OR PROVIDED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Dato Dato Device Phone 4	SIGNAT	URE:	SIGNING MANAGING MEMBER, MAJ	LAGER, OR	AUTHORIZED REPRESE	41.	27/07 (786)5569181 Date Daytore Phone 4	_

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