

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061936

FILED  
Aug 02, 2007  
Secretary of State

Entity Name: MYMAX INTERNATIONAL L.L.C.

**Current Principal Place of Business:**

2274 NW 82 AVE.  
MIAMI, FL 33122

**New Principal Place of Business:**

2248 NW 82 AVE.  
MIAMI, FL 33122

**Current Mailing Address:**

2274 NW 82 AVE.  
MIAMI, FL 33122

**New Mailing Address:**

2248 NW 82 AVE.  
MIAMI, FL 33122

FEI Number: 20-5195647      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

KALKAS, MARTTI  
245 SE 1ST STREET SUITE 225  
MIAMI, FL 33131 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: KFOURI, JORGVE JUNIOR  
Address: RUA CASTRO ALVES 631  
City-St-Zip: SAO PAULO, SP BRAZIL 01532-0,

Title: MGR ( ) Delete  
Name: KFOURI, RITA APARECIDA  
Address: RUA CASTRO ALVES 631  
City-St-Zip: SAO PAULO, SP BRAZIL 01532-0,

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: KFOURI, JORGE JUNIOR  
Address: RUA CASTRO ALVES 631  
City-St-Zip: SAO PAULO, SP BRAZIL 01532-0, SP

Title: MGR (X) Change ( ) Addition  
Name: KFOURI, RITA APARECIDA  
Address: RUA CASTRO ALVES 631  
City-St-Zip: SAO PAULO, SP BRAZIL 01532-0, SP

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: CARLOS FAKHOURY

MGR

08/02/2007

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