

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066932

Entity Name: THE NOMAD EYE LLC

FILED
Mar 28, 2007
Secretary of State

Current Principal Place of Business:

1627 BRICKELL AVE APT 2506
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

1627 BRICKELL AVE APT 2506
MIAMI, FL 33129

New Mailing Address:

FEI Number: 20-5145216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, MARIA P
1627 BRICKELL AVE APT 2506
MIAMI, FL 33129 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: MGRM () Delete
Name: LEON, MARIA P
Address: 1627 BRICKELL AVE APT 2806
City-St-Zip: MIAMI, FL 33129

Title: MGRM (X) Delete
Name: LLOSA, CAROLINA
Address: 1541 BRICKEL AVE APT 1003
City-St-Zip: MIAMI, FL 33129

Title: MGRM () Delete
Name: BERCKEMEYER, TALIA
Address: 2101 BRICKEL AVE APT 2411
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARIA P LEON

MGRM

03/28/2007

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