

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073334

FILED
Apr 11, 2008
Secretary of State

Entity Name: INTERTRADE MEXICO, LLC

Current Principal Place of Business:

7000 ISLAND BLVD
1207
AVENTURA, FL 33160

New Principal Place of Business:

7000 ISLAND BLVD
1207
AVENTURA, FL 331602471 US

Current Mailing Address:

7000 ISLAND BLVD
1207
AVENTURA, FL 33160

New Mailing Address:

7000 ISLAND BLVD
1207
AVENTURA, FL 331602471 US

FEI Number: 20-5273945

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
STE 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: SALAZAR, CARLA
Address: 1920 EAST HALLANDALE BEACH BLVD,PH 8
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGR () Delete
Name: SACAL, MIGUEL
Address: 1920 EAST HALLANDALE BEACH BLVD,PH 8
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SALAZAR, CARLA
Address: 7000 ISLAND BLVD, # 1207
City-St-Zip: AVENTURA, FL 331602471 US

Title: MGR (X) Change () Addition
Name: SACAL, MIGUEL
Address: 7000 ISLAND BLVD, # 1207
City-St-Zip: AVENTURA, FL 331602471 US

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: MIGUEL SACAL

MGR

04/11/2008

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