2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# L06000096761

Entity Name: THE ALLIED GROUP LLC.

Current Principal Place of Business:

550 BILTMORE WAY
SUITE 200
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

550 BILTMORE WAY
SUITE 200
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-5658716 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CMS INTERNATIONAL ENTERPRISES, INC.
550 BILTMORE WAY
SUITE 200
CORAL GABLES, FL 33134 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:	ALONSO, CARLOS	
Address:	14395 SW 139 CT., SUITE 103	
City-St-Zip:	MIAMI, FL 33186 US	
Title:	MGR	( ) Delete
Name:	MACIAS, JOSE GABRIEL	
Address:	14395 SW 139 CT., SUITE 103	
City-St-Zip:	MIAMI, FL 33186 US	
Title:	MGR	( ) Delete
Name:	RAMIREZ, LUIS M	
Address:	7081 SW 47TH ST.	
City-St-Zip:	MIAMI, FL 33155 US	
Title:	MGR	(X) Delete
Name:	RUBIO, MANUEL	
Address:	7081 SW 47TH ST.	
City-St-Zip:	MIAMI, FL 33155 US	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGR	(X) Change ( ) Addition
Name:	RODRIGUEZ, D ELENA	
Address:	7081 S.W. 47TH ST.	
City-St-Zip:	MIAMI, FL 33155 US	
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: CARLOS ALONSO MGR 02/08/2007

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