## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000098293

Entity Name: SKORPIOS, LLC.

FILED Mar 20, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2533 SW 19 AVE 2533 SW 19 AVENUE

SUITE 400 300

MIAMI, FL 33133 COCONUT GROVE, FL 33133

**Current Mailing Address: New Mailing Address:** 

2533 SW 19 AVE 2533 SW 19 AVENUE

SUITE 400

MIAMI, FL 33133 COCONUT GROVE, FL 33133

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

OVADIA, SILVIA OVADIA, ALBERT 2533 SW 19 AVENUE 2533 SW 19 AVE., SUITE 300

SUITE 400 MIAMI, FL 33133

COCONUT GROVE, FL 33133 US

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: ALBERT OVADIA 03/20/2008

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR () Delete Title: (X) Change ( ) Addition

VILLAR, PEDRO F VILLAR, PEDRO F Name: Name: Address: 2533 SW 19 AVE., SUITE 300 Address: 2533 SW 19 AVENUE, SUITE 400 City-St-Zip: MIAMI, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133

( ) Change (X) Addition Title: Title: MGR

() Delete Name: Name: OVADIA, ALBERT S

Address: Address: 2533 SW 19 AVENUE, SUITE 400 City-St-Zip: City-St-Zip: COCONUT GROVE, FL 33133

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: ALBERT OVADIA 03/20/2008