

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102615

FILED
May 10, 2007
Secretary of State

Entity Name: CLEARLIGHT INVESTMENTS, LLC

Current Principal Place of Business:

1541 BRIDGEWOOD DR
BOCA RATON, FL 33434

New Principal Place of Business:

CRA 14 # 93 B 32
503
BOGOTA, . COLOMBIA

Current Mailing Address:

5805 BLUE LAGOON DRIVE
STE 200
MIAMI, FL 33126

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

Name and Address of New Registered Agent:

AG CORPORATE SERVICES, LLC
5805 BLUE LAGOON DRIVE
STE 200
MIAMI, FL 33126 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JARAMILLO, LUZ MARIA
Address: 1541 BRIDGEWOOD DR
City-St-Zip: BOCA RATON, FL 33434

Title: MGR (X) Delete
Name: VAN BRANTEGHEM, KATIA
Address: 1541 BRIDGEWOOD DR
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GONZALEZ, MAURICIO
Address: CRA 14 # 93 B 32 OF 503
City-St-Zip: BOGOTA, . COLOMBIA

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

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: MAURICIO GONZALEZ

MGR

05/10/2007

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