2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000116808

1. Entity Name INVERSIONES MEDITERRANEA, LLC



Principal Place of Business

1200 BRICKELL AVE. Suite 860 Miami, FL 33131 Mailing Address

1200 BRICKELL AVE. Suite 860 Miami, Fl 33131

FILED May 08, 2008 8:00 am Secretary of State

05-08-2008 90110 001 ***555.00

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04222008 No Chg-LLC

CR2E083 (12/07)

4,	FEI Number
	20-3307828

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, PETER M 1911 NW 150 AVE. SUITE 201 PEMBROKE PINES, FL 33028

DO NOT WRITE IN THIS SPACE

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8. The above the obliga	e named entity submits this statement for the purpose of cha- tions of registered agent.	nging its registered office or registered agent, or both, in the State	e of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signeture required when reinstating)	DATE
FILI After Ma	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	(No. 12. Togodorov sgori og etto togodo mai taratary)	UNIE
9.	MANAGING MEMBERS/MANAGERS		
THILE	MGRM		
NAME	RUSSO D'ANNA, GIUSEPPE		
STREET ADDRESS	1200 BRICKELL AVE.	100	
City-St-ZiP	MIAMI, FL 33131		
TITLE	MGRM	·	the state of the s
NAME	RUSSO, FRANCESCA		
STREET ADDRESS	1200 BRICKELL AVE.		
CITY-ST-ZIP	MIAMI, FL 33131		
TITLE	#161		
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CITY-ST-ZIP			The property of the second second
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NAME			* "
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Lun Couppe

CITY-ST-ZIP

M6RM

4/22/08

Daytime Phone