

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000032849

FILED
Apr 10, 2008
Secretary of State

Entity Name: ECOHOLDING LLC

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
SUITE 240
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 240
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 77-0681385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRATS FERNANDEZ & CO, PA.
2121 PONCE DE LEON BLVD
SUITE 240
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: MGRM () Delete
Name: JAIMES DE PINO, MERCEDES
Address: 2121 PONCE DE LEON BLVD 240
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: CAVANZO, ROBERTO
Address: 2121 PONCE DE LEON BLVD 240
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: DELGADO, NICOLAS
Address: 2121 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

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

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 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: ROBERTO CAVANZO

MGRM

04/10/2008

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