

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053487

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: INTEGRA2, LLC

## Current Principal Place of Business:

10451 N.W. 117TH AVENUE  
SUITE 250  
MEDLEY, FL 33178 US

## New Principal Place of Business:

## Current Mailing Address:

10451 N.W. 117TH AVENUE  
SUITE 250  
MEDLEY, FL 33178 US

## New Mailing Address:

FEI Number: 26-0202618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RESTREPO, DIEGO L ESQ.  
396 ALHAMBRA CIRCLE  
SUITE 210  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

RESTREPO, DIEGO L ESQ.  
2600 DOUGLAS ROAD  
SUITE 506  
CORAL GABLES, FL 33134 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: DIEGO L RESTREPO

03/26/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SALDARRIAGA, JULIAN  
Address: 10451 N.W. 117TH AVENUE, SUITE 250  
City-St-Zip: MEDLEY, FL 33178 US

Title: MGR ( ) Delete  
Name: VIZCAINO, JUAN CARLOS  
Address: 10451 N.W. 117TH AVENUE, SUITE 250  
City-St-Zip: MEDLEY, FL 33178 US

Title: MGR ( ) Delete  
Name: URIBE, ANDRES FELIPE  
Address: 10451 N.W. 117TH AVENUE, SUITE 250  
City-St-Zip: MEDLEY, FL 33178 US

Title: MGR (X) Delete  
Name: RAMOS, MIGUEL  
Address: 10451 N.W. 117TH AVENUE, SUITE 250  
City-St-Zip: MEDLEY, FL 33178 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: URIBE, ANDRES FELIPE  
Address: 10451 N.W. 117TH AVENUE, SUITE 250  
City-St-Zip: MEDLEY, FL 33178 US

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

Title: MGR (X) Change ( ) Addition  
Name: RAMOS, MIGUEL  
Address: 10451 N.W. 117TH AVENUE, SUITE 250  
City-St-Zip: MEDLEY, FL 33178 US

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: JUAN CARLOS VIZCAINO

MGR

03/26/2009

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