2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000056267

Entity Name: MIAMI WORLD DELIVERY, LLC

FILED Mar 16, 2012 Secretary of State

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

598 NW 54 ST. 11931 NW 21 ST

MIAMI, FL 33127 PEMBROKE PINES, FL 33026 US

Current Mailing Address: New Mailing Address:

598 NW 54 ST. 11931 NW 21 ST

MIAMI, FL 33127 PEMBROKE PINES, FL 33026 US

FEI Number: 26-0263730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PECORA, DIOMAR
598 NW 54 ST.
PECORA, DIOMAR
11931 NW 21 ST

MIAMI, FL 33127 US PEMBROKE PINES, FL 33026 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: DIOMAR PECORA 03/16/2012

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Γitle: MGR

Name: MEDINA, MARIA L Address: 11931 NW 21 ST

City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: MGR

Name: PECORA, DIOMAR Address: 11931 NW 21 ST

City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: MGR

Name: DIOMAR, PECORA Address: 11931 NW 21ST ST

City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: MGR

Name: DIOMAR, PECORA Address: 11931 NW 21ST ST

City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: MGR

Name: DIOMAR, PECORA Address: 11931 NW 21ST ST

City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: MGR

Name: DIOMAR, PECORA Address: 11931 NW 21ST ST

City-St-Zip: PEMBROKE PINES, FL 33026 US

I hereby 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 Statues.

SIGNATURE: DIOMAR PECORA MGR 03/16/2012

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