

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089570

Entity Name: MEGAVAL VALORES, LLC

FILED  
Apr 28, 2008  
Secretary of State

## Current Principal Place of Business:

AV. SAN JUAN BOSCO CENTRO ALTAMIRA  
PISO 14 ALTAMIRA CHACAO  
CARACAS, 1060,

## New Principal Place of Business:

5301 N. FEDERAL HWY SUITE 380  
BOCA RATON, FL 33487

## Current Mailing Address:

AV. SAN JUAN BOSCO CENTRO ALTAMIRA  
PISO 14 ALTAMIRA CHACAO  
CARACAS, 1060,

## New Mailing Address:

5301 N. FEDERAL HWY SUITE 380  
BOCA RATON, FL 33487

FEI Number: 26-0815317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: ECHEVERRIA, LIONEL  
Address: AV. SAN JUAN BOSCO CENTRO ALTAMIRA  
City-St-Zip: CARACAS, 1060,

Title: MGRM ( ) Delete  
Name: KNOTSCHKE, HENRIQUE  
Address: AV. SAN JUAN BOSCO CENTRO ALTAMIRA  
City-St-Zip: CARACAS, 1060,

Title: MGRM ( ) Delete  
Name: VERA, ANDRES  
Address: AV. SAN JUAN BOSCO CENTRO ALTAMIRA  
City-St-Zip: CARACAS, 1060,

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ECHEVERRIA, LIONEL  
Address: 5301 N. FEDERAL HWY SUITE 380  
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM (X) Change ( ) Addition  
Name: KNOTSCHKE, HENRIQUE  
Address: 5301 N. FEDERAL HWY SUITE 380  
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM (X) Change ( ) Addition  
Name: VERA, ANDRES  
Address: 5301 N. FEDERAL HWY SUITE 380  
City-St-Zip: BOCA RATON, FL 33487

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: LIONEL ECHEVERRIA

MGRM

04/28/2008

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