

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098186

Entity Name: PIRULETE HOLDINGS LLC

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

BRICKELL BAY OFFICE TOWER
1001 BRICKELL BAY DRIVE, SUITE 2310
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

BRICKELL BAY OFFICE TOWER
1001 BRICKELL BAY DRIVE, SUITE 2310
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 75-3257195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PIRULETE HOLDING LTD,
Address: MARCY BUILDING, 2ND FLOOR PURCELL ESTATE
City-St-Zip: PO BOX 2416 RDTOWN TORTOLA, . BVI

Title: MGR () Delete
Name: D'EMPAIRE PARRA, MANUEL ERNESTO
Address: 1001 BRICKELL BAY DRIVE, SUITE 2310
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PIRULETE HOLDING LTD,
Address: 2ND FLOOR PURCELL ESTATE, PO BOX 2416,
City-St-Zip: STE 2310 RD TOWN BAY, MIAMI, FL 333131 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: MANUEL ERNESTO D'EMPAIRE PARRA

MGR

02/17/2009

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