2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105905

Entity Name: TRADITION INVESTMENTS INTERNATIONAL, LLC

FILED Apr 30, 2009 Secretary of State

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

2250 NW 136TH AVENUE PEMBROKE PINES, FL 33028

Current Mailing Address: New Mailing Address:

2250 NW 136TH AVENUE PEMBROKE PINES, FL 33028

FEI Number: 26-1293734 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:

TOVAR, ILEANA ARIAS ESQ 2250 NW 136TH AVENUE PEMBROKE PINES, FL 33028 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete

Name: CARLOS ALBERTO MEDINA MEDINA

Address: 1092 SE 39TH TERRACE City-St-Zip: OKEECHOBEE, FL 33028

Title: MGR () Delete

Name: DANAE CIBELES HERNANDEZ PEREZ

Address: 1092 SE 39TH TERRACE

City-St-Zip: OKEECHOBEE, FL 33028

Title: MGRM (X) Delete
Name: CARMEN DELIA MEDINA

Address: CALLE EL ROSAL # 35 LA COOPERATIVA

City-St-Zip: MARACAY ,, AR 02110 VZ

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: CARLOS ALBERTO MEDINA MEDINA

Address: 1092 SE 39TH TERRACE City-St-Zip: OKEECHOBEE, FL 33028

City-St-Zip: OKEECHOBEE, FL 33028

Title: MGRM (X) Change () Addition
Name: DANAE CIBELES HERNANDEZ PEREZ

Address: 1092 SE 39TH TERRACE

City-St-Zip: OKEECHOBEE, FL 33028

Title: () Change () Addition

Address: City-St-Zip:

Name:

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: CARLOS ALBERTO MEDINA MEDINA

MGRM

04/30/2009