

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116160

FILED
Apr 20, 2009
Secretary of State

Entity Name: NOCLA VISION LLC

Current Principal Place of Business:

13015 SW 89 PLACE SUITE 205
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

13015 SW 89 PLACE SUITE 205
MIAMI, FL 33176

New Mailing Address:

FEI Number: 41-2258612 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

THE GECKA GROUP INC
9360 SW 72 STREET SUITE 232
MIAMI, FL 33173 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: GOMES, JULIO
Address: RUA CONDE DE BONFIM, 485/204
City-St-Zip: TIJUCA RIO DE JANEIRO, RJ BRAZIL

Title: MGRM () Delete
Name: MAGALHAES, HELIO
Address: RUA CONDE DE BONFIM, 485/204
City-St-Zip: TIJUCA RIO DE JANEIRO, RJ BRAZIL

ADDITIONS/CHANGES:

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

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: JULIO GOMEZ MGR 04/20/2009

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