

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Oct 14, 2009  
Secretary of State**

DOCUMENT# L08000039791

Entity Name: MAUNA LOA INVESTMENTS LLC

**Current Principal Place of Business:**

15025 NW 77 AVE  
SUITE 124  
MIAMI, FL 33014

**New Principal Place of Business:**

8004 NW 154 ST #347  
ST # 347  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

15025 NW 77 AVE  
SUITE 124  
MIAMI, FL 33014

**New Mailing Address:**

8004 NW 154 ST #347  
ST # 347  
MIAMI LAKES, FL 33016

FEI Number: 26-2445130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIL, MAWANPHY  
15025 NW 77 AVE  
SUITE 124  
MIAMI, FL 33014 US

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

GIL, MAWANPHY  
8004 NW 154 ST # 347  
SUITE 124  
MIAMI, FL 33016 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: MAWANPHY GIL

10/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GIL, MAWANPHY  
Address: 15025 NW 77 AVE SUITE 124  
City-St-Zip: MIAMI, FL 33014

Title: MGRM ( ) Delete  
Name: GIL, MARIA ELENA  
Address: 15025 NW 77 AVE SUITE 124  
City-St-Zip: MIAMI, FL 33014

Title: MGRM ( ) Delete  
Name: GIL, MARIA DEL ROSA  
Address: 150254 NW 77 AVE SUITE 124  
City-St-Zip: MIAMI, FL 33014

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GIL, MAWANPHY  
Address: 8004 NW 154 ST  
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGRM (X) Change ( ) Addition  
Name: GIL, MARIA ELENA  
Address: 8004 NW 154 ST  
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGRM (X) Change ( ) Addition  
Name: GIL, MARIA DEL ROSA  
Address: 8004 NW 154 ST #347  
City-St-Zip: MIAMI LAKES, FL 33016

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: MAWANPHY GIL

MGR

10/14/2009

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