2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050421

Entity Name: CARRENO, LASPADA & ASSOCIATES, LLC

SANCHEZ DE BUSTAMANTE 2560 5A

CAPITAL FEDERAL CP, AR ARGENTINA

Address:

City-St-Zip:

FILED Apr 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2136 NE 123RD STREET NORTH MIAMI, FL 33181 **Current Mailing Address: New Mailing Address:** 2136 NE 123RD STREET NORTH MIAMI, FL 33181 FEI Number: 26-2647482 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: MARKS, KIM 2136 NÉ 123RD STREET NORTH MIAMI, FL 33181 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: ADDITIONS/CHANGES: MGR () Delete Title: () Change () Addition NIEVES, ALBERTO J Name: Name: Address: ZELADA 7608 Address: City-St-Zip: CAPITAL FEDERAL CP 1440, AR ARGENTINA City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: LOMBILLA, PATRICIO Name: Address: **EMILIO MITRE 484** Address: City-St-Zip: MARTINEZ PCIA BS AS 1640, AR ARGENTINA City-St-Zip: Title: MGR () Delete Title: () Change () Addition MERINO, DIEGO G Name: 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.

Address:

City-St-Zip:

SIGNATURE: ALBERTO NIEVES MGR 04/05/2009