

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000106597

FILED
Apr 29, 2009
Secretary of State

Entity Name: SOUTH ENERGY GROUP LLC

Current Principal Place of Business:

1812 NW 82 AVE.
DORAL, FL 33126

New Principal Place of Business:

Current Mailing Address:

1812 NW 82 AVE.
DORAL, FL 33126

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARA, LUIS ANDRES
1812 NW 82 AVE.
DORAL, FL 33126 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: SARA, LUIS ANDRES
Address: 1812 NW 82 AVE.
City-St-Zip: DORAL, FL 33126

Title: MGRM () Delete
Name: NAZAR, DIEGO
Address: 1812 NW 82 AVE.
City-St-Zip: DORAL, FL 33126

Title: MGRM () Delete
Name: DELGADO, MARCELO FABIAN
Address: 1812 NW 82 AVE.
City-St-Zip: DORAL, FL 33126

Title: MGRM () Delete
Name: CASANE, OSCAR ANTONIO
Address: 1812 NW 82 AVE.
City-St-Zip: DORAL, FL 33126

ADDITIONS/CHANGES:

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

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

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: SARA LUIS

MGRM

04/29/2009

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