

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000547

Entity Name: VENEFLOR, L.C.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

15011 S.W. 43RD TERRACE
MIAMI, FL 33185 US

New Principal Place of Business:

325 S BISCAYNE BLVD
1514
MIAMI, FL 33131 US

Current Mailing Address:

801 BRICKELL KEY BLVD
2504
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0689478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OTTOLINO, GIUSEPPE
15011 S.W. 43RD TERRACE
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

OTTOLINO, GIUSEPPE
325 S BISCAYNE BLVD
1514
MIAMI, FL 33131 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:

04/25/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OTTOLINO, GIUSEPPE
Address: 15011 S.W. 43RD TERRACE
City-St-Zip: MIAMI, FL 33185 US

Title: MGRM () Delete
Name: OTTOLINO, YADIRA
Address: 15011 S.W. 43RD TERRACE
City-St-Zip: MIAMI, FL 33185 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OTTOLINO, GIUSEPPE
Address: 325 S BISCAYNE BLVD # 1514
City-St-Zip: MIAMI, FL 33131 US

Title: MGRM (X) Change () Addition
Name: OTTOLINO, YADIRA
Address: 325 S BISCAYNE BLVD # 1514
City-St-Zip: MIAMI, FL 33131 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GIUSEPPE OTTOLINO

MGR

04/25/2006

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