

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001963

Entity Name: ALFERCA MIAMI, L.L.C.

FILED
May 17, 2006
Secretary of State

Current Principal Place of Business:

700 S. ROYAL POINCIANA BLVD., STE 502
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

700 S. ROYAL POINCIANA BLVD., STE 502
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-0935329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ALHAMBRA REGISTERED AGENTS, INC.
C/O KARP & GENAUER, P.A.
2 ALHAMBRA PLAZA SUITE 1202
CORAL GABLES, FL 33134 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:

Title: MGR () Delete
Name: FERNANDEZ, FEDERICO
Address: 1000 WILLIAMS ISLAND BLVD., APT 1105
City-St-Zip: AVENTURA, FL 33160 US

Title: MGR () Delete
Name: FERNANDEZ, JOSE A
Address: 1000 WILLIAMS ISLAND BLVD., APT. 1105
City-St-Zip: AVENTURA, FL 33160 US

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 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: FEDERICO FERNANDEZ

MGR

05/17/2006

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