


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Mar 16, 2006 08:00 AM
Secretary of State**

DOCUMENT # L01000003016	
1. Entity Name 1616 INVESTMENT, LLC	

Principal Place of Business 2271 W. 77 ST. HIALEAH, FL 33016	Mailing Address 2271 W. 77 ST. HIALEAH, FL 33016
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02222006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1082844	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ALEJANDRO LEON, JOSE
2271 W. 77TH ST.
HIALEAH, FL 33016

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

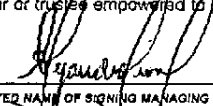
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LEON, A 358 SW 163 AVE PEMBROKE PINES, FL 33027
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT ROVIS, GIULIANO 10977 GOLDEN EASLE CT PLANTATION, FL 33324
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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03/27/06-80006-015 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 603, Florida Statutes.

SIGNATURE:  Date: 3-14-06 Daytime Phone #: 305-5580495

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #