


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000016327

1. Entity Name
LAZZADAS, LLC



Principal Place of Business Mailing Address

7233 N.W. 113 CT. 7233 N.W. 113 CT.
 MIAMI, FL 33178 MIAMI, FL 33178



04222005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0582686	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

FLORIDA CORPORATE REGISTERED AGENTS, INC.
 8180 N.W. 36 ST., SUITE 230
 MIAMI, FL 33166

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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 reinstating) _____ DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM INVERSIONES AYURVEDA CA CALLE LA GUARITA EL CAFETAL APARTADO, 1081, CARACAS,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EDOS, LLC 7233 N.W. 133 CT. MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 04/29/05-80048-003 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 608, Florida Statutes.

SIGNATURE: [Signature] **Ubarianne Bonaroon** 04/25/05 (786) 3317763

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