

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015813

**FILED
Jul 11, 2006
Secretary of State**

Entity Name: NEW ALASKA, LLC

Current Principal Place of Business:

11205 SW 11TH ST
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

1480 EUCLID AVE
APT 204
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

ARAZOZA & FERNANDEZ-FRAGA, P.A.
2100 SALZEDO STREET
SUITE 300
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:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: BELLO, PAULO S
Address: 11205 SW 111TH ST
City-St-Zip: MIAMI, FL 33176

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

Title: MGR () Delete
Name: BELLO, MARIA AUGUSTA T
Address: 11205 SW 111TH ST
City-St-Zip: MIAMI, FL 33176

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

Title: MGR () Delete
Name: BELLO, PATRICIA
Address: 1480 EUCLID AVE
City-St-Zip: MIAMI BEACH, FL 33139

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: PATRICIA BELLO

MGR

07/11/2006

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