


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # L02000016420</b> 1. Entity Name <b>GAVINO INVESTMENTS, L.L.C.</b>	
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FILED

06 APR 14 PM 1:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business 230 SOUTH DIXIE HWY. BOCA RATON, FL 33432	Mailing Address 230 SOUTH DIXIE HWY. BOCA RATON, FL 33432
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04112006 No Chg-LLC      CR2E083 (11/05) *olp*

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4. FEI Number <b>81-0565247</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>GAVINO, VIRGINIA B</b> <b>230 SOUTH DIXIE HWY.</b> <b>BOCA RATON, FL 33432</b>	<p style="font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM <b>GAVINO, UGO</b> 230 SOUTH DIXIE HWY. BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM <b>GAVINO, VIRGINIA B</b> 230 SOUTH DIXIE HWY. BOCA RATON, FL 33432
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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 608, Florida Statutes.

SIGNATURE: *Ugo Gavino*      Date: *4/11/06* (561) 395-7731

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