


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000016420 1. Entity Name GAVINO INVESTMENTS, L.L.C.	
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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) *ol*

DO NOT WRITE IN THIS SPACE

4. FEI Number 81-0565247	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

GAVINO, VIRGINIA B
 230 SOUTH DIXIE HWY.
 BOCA RATON, FL 33432

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 reinstating) DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GAVINO, UGO
STREET ADDRESS	230 SOUTH DIXIE HWY.
CITY - ST - ZIP	BOCA RATON, FL 33432
TITLE	MGRM
NAME	GAVINO, VIRGINIA B
STREET ADDRESS	230 SOUTH DIXIE HWY.
CITY - ST - ZIP	BOCA RATON, FL 33432
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE
IN THIS SPACE

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04/28/06--01033--030 **250.00

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* Daytime Phone #: *(561) 395-7731*

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