

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033275

Entity Name: ELCA, LLC

FILED
Jun 29, 2006
Secretary of State

Current Principal Place of Business:

18100 NORTH BAY RD., UNIT 408
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

18851 NE 29TH AVE
900
AVENTURA, FL 33180 US

New Mailing Address:

18851 NE 29TH AVENUE
SUITE 900
AVENTURA, FL 33180 US

FEI Number: 20-0202039 FEI Number Applied For () FEI Number Not Applicable () 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:

ROUSSO, MARK E ESQ
18851 NE 29TH AVE., STE. 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

ROUSSO, MARK E ESQ
18851 NE 29TH AVENUE
SUITE 900
AVENTURA, FL 33180 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: MARK E ROUSSO

06/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CARIDAD QUEROL NINO,
Address: 18100 NORTH BAY RD., UNIT 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: JORGE LUIS GIMENEZ,
Address: 18100 NORTH BAY RD., UNIT 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: GIMENEZ, CLIFFORD
Address: 18100 NORTH BAY RD., UNIT 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: GIMENEZ, SORAYA
Address: 18100 NORTH BAY RD., UNIT 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: ELIA TORREALBA DE GI, MENEZ
Address: 18100 NORTH BAY RD., UNIT 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES:

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

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

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

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

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: JORGE LUIS GIMENEZ

MGR

06/29/2006

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