## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016244

**Current Mailing Address:** 

Entity Name: SCHENK & ASSOCIATES, PLC

**FILED** Mar 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

999 BRICKELL AVENUE STE 700 999 BRICKELL AVENUE MIAMI, FL 33131

SUITE 700 MIAMI, FL 33131

**New Mailing Address:** 

999 BRICKELL AVENUE STE 700 999 BRICKELL AVENUE MIAMI, FL 33131 SUITE 700

MIAMI, FL 33131

FEI Number: 20-0802065 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHENK, MAXIMILIAN J ESQ SCHENK, MAXIMILIAN J ESQ 999 BRICKELL AVENUE STE 700 999 BRICKELL AVENUE MIAMI, FL 33131 SUITE 700

MIAMI, FL 33131 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: MAXIMILIAN SCHENK 03/28/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: (X) Change ( ) Addition () Delete SCHENK, MAXIMILIAN J SCHENK, MAXIMILIAN J Name: Name:

Address: 2555 PONCE DE LEON BLVD., SUITE 200 Address: 999 BRICKELL AVENUE, SUITE 700

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: MAXIMILIAN SCHENK **MGRM** 03/28/2006