


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 07, 2006 08:00 AM
Secretary of State


DOCUMENT # L04000089846

1. Entity Name
VOLCANO, LLC.



Principal Place of Business 2600 S. DOUGLAS ROAD PH-6 CORAL GABLES, FL 33134	Mailing Address 2600 S. DOUGLAS ROAD PH-6 CORAL GABLES, FL 33134
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DO NOT WRITE IN THIS SPACE



07052006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1997116	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

PADIAL, JOSE I P.A.
 2600 SOUTH DOUGLAS ROAD
 PENTHOUSE 6
 CORAL GABLES, FL 33134

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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 _____

Filing Fee is \$50.00
Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TORREBIARTE, JUAN ANDRES 2600 S. DOUGLAS ROAD PH-6 CORAL GABLES, FL 33134
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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: *Andres Torrebiarte* **Andres Torrebiarte** 7/5/06 305-443-8010

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