2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# L05000011559

Entity Name: DR. NOREEN M. ZAMBRANA & ASSOC LLC

Current Principal Place of Business:

8247-C NW 36TH ST
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8247-C NW 36TH ST
MIAMI, FL 33166

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KINLAW, STEVE
8247-C NW 36TH ST
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: NOREEN ZAMBRANA, LLC,
Address: 1485 S.W. 157TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33027

Title: MGRM ( ) Delete
Name: KINLAW, STEVE
Address: 8247-C NW 36TH ST
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GILBERT, THOMAS LEE
Address: 8247-C NW 36TH ST
City-St-Zip: MIAMI, FL 33166

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: STEVE KINLAW MGRM 03/17/2006

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