

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034140

FILED  
Apr 06, 2006  
Secretary of State

Entity Name: ON THE SIDE INVESTMENTS LLC

**Current Principal Place of Business:**

12346 NW 52 COURT  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

12346 NW 52 COURT  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

FEI Number: 20-4488638

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AFFATATI, PETER L SR.  
12346 NW 52 COURT  
CORAL SPRINGS, FL 33076 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: MGR ( ) Delete  
Name: AFFATATI, PETER L SR.  
Address: 12346 NW 52 COURT  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGR ( ) Delete  
Name: LINARELLO, SALVATORE  
Address: 2517 EAST 24 STREET  
City-St-Zip: BROOKLYN, NY 11235

Title: MGR ( ) Delete  
Name: RASO, WAYNE T  
Address: 2497 LEGION STREET  
City-St-Zip: BELLMORE, NY 11710

Title: MGR ( ) Delete  
Name: DERESPINO, JAMES P  
Address: 6D REVERE LANE  
City-St-Zip: STATEN ISLAND, NY 10306

Title: MGR (X) Delete  
Name: FRISCIA, PATRICK  
Address: 12346 NW 52 COURT  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGR (X) Delete  
Name: MIEDNIK, BENJAMIN  
Address: 12346 NW 52 COURT  
City-St-Zip: CORAL SPRINGS, FL 33076

**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: MGR (X) Change ( ) Addition  
Name: DERESPINO, JAMES P  
Address: 5700 NW 61 PLACE  
City-St-Zip: PARKLAND, FL 33067

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: PETER L. AFFATATI SR.

MGR

04/06/2006

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