## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000114995

Address:

City-St-Zip:

PEMBROKE PINES, FL 33026

Entity Name: PAZETTI ENTERPRISES, LLC

FILED Jul 19, 2006 Secretary of State

Current P	rincipal Place of Business:	New Principal I	Place of Business:	
BLD# 3 AF	ONY POINT CIRCLE PT# 223 KE PINES, FL 33026			
Current Mailing Address:		New Mailing Ad	New Mailing Address:	
BLD# 3 AF	ONY POINT CIRCLE PT# 223 KE PINES, FL 33026			
	: 20-3946365 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the limited liability compa	FEI Number Not Applicable		
	Address of Current Registered Agent:	-	ress of New Registered Agent:	
4160 WES SUITE 309	CHEEMA, P.A. ST 16TH AVE. ) FL 33012 US			
	named entity submits this statement for the pure of Florida.	pose of changing its reg	istered office or registered agent, or both	
SIGNATUF	RE:			
	Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete PAZ, ORLANDO SR. 1100 COLONY POINT CIRCLE BLD3 APT223 PEMBROKE PINES, FL 33026	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete PAZ, MARTA 1100 COLONY POINT CIRCLE BLD3 APT223 PEMBROKE PINES, FL 33026	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	MGRM () Delete PAZ, ORLANDO JR. 1100 COLONY POINT CIRCLE BLD3 APT223	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: MARTA PAZ MGRM 07/19/2006