


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000005022
1. Entity Name
GOLD KROWN PROPERTIES, L.L.C.



Principal Place of Business C/O KRONGOLD & SINGER, P.L. 1441 BRICKELL AVE., SUITE 1430 MIAMI, FL 33131 US	Mailing Address C/O KRONGOLD & SINGER, P.L. 1441 BRICKELL AVE., SUITE 1430 MIAMI, FL 33131 US
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03312006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0952281	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KRONGOLD, M. RONALD
C/O KRONGOLD & SINGER, P.L.
1441 BRICKELL AVE., SUITE 1430
MIAMI, FL 33131

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2006**

1100000510119
04/28/06-80070-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KRONGOLD, M. RONALD 1441 BRICKELL AVE., SUITE 1430 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KRONGOLD, RANDI M 1441 BRICKELL AVE., SUITE 1430 MIAMI, FL 33131
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  **3/31/06 (305) 416-4545**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #