2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2006
Secretary of State

DOCUMENT# L05000093296

Entity Name: MALOOF ENTERPRISES, LLC

Current Principal Place of Business:

16322 NW 15TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

16322 NW 15TH STREET
PEMBROKE PINES, FL 33028

Current Mailing Address:

16322 NW 15TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

16322 NW 15 TH STREET
PEMBROKE PINES, FL 33028

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

Name and Address of Current Registered Agent:

MALOOF, AL
16322 NW 15TH STREET
PEMBROKE PINES, FL 33028 US

Name and Address of New Registered Agent:

MALOOF, AL
100 SE 2ND STREET
4400
MIAMI, FL 33131 US

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: AL MALOOF 01/18/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR. ( ) Change (X) Addition
Name: MALOOF, AL
Address: 100 SE 2ND STREET, # 4400
City-St-Zip: MIAMI, FL 33131

Title: MRS. ( ) Change (X) Addition
Name: MALOOF, PAULINE
Address: 16322 NW 15TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

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: AL MALOOF MR. 01/18/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date