

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000000548

**FILED**  
**Jan 21, 2006**  
**Secretary of State**

**Entity Name:** BBR, L.L.C.

**Current Principal Place of Business:**

9727 NORTHWEST 44 TERRACE  
MIAMI, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

9727 NORTHWEST 44 TERRACE  
MIAMI, FL 33178

**New Mailing Address:**

**FEI Number:** 75-2975425      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CMS INTERNATIONAL ENTERPRISES, INC.  
550 BILTMORE WAY  
MEZZANINE - SUITE 200  
CORAL GABLES, FL 33134 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: BALESTRINI, ULISES J  
Address: 9727 N.W. 44TH TERR.  
City-St-Zip: MIAMI, FL 33178

Title: MGR      ( ) Delete  
Name: BALESTRINI, ULISES  
Address: 9727 NORTHWEST 44 TERRACE  
City-St-Zip: MIAMI, FL 33178

Title: MGR      ( ) Delete  
Name: ROJAS, JUAN  
Address: 9727 NORTHWEST 44 TERRACE  
City-St-Zip: MIAMI, FL 33178

**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:

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: ULISES J BALESTRINI

MGR

01/21/2006

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