2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011423

Address: City-St-Zip:

Entity Name: AMKE REGISTERED AGENTS, L.L.C.

ONE SE THIRD AVE., SUITE 2250

MIAMI, FL 33131

FILED Mar 20, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
ONE S.E. 1 MIAMI, FL	THIRD AVE, S 33131	TE 2250		
Current Mailing Address:			New Mailing Address:	
ONE S.E. T MIAMI, FL	THIRD AVE, S' 33131	TE 2250		
FEI Number:	86-1124939	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
	TRUST INTER THIRD AVE	ESCAGEDO, P.A. NATIONAL CTR		
The above in the State		submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both
SIGNATUR	RE:			
	Electron	ic Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	ABALLI, ARTUR	AVE., SUITE 2250	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MILNE, HENDR	AVE., SUITE 2250	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	KALIL, CRAIG F	AVE., SUITE 2250	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGR () ESCAGEDO, AN	Delete JA M	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: ARTURO J. ABALLI 03/20/2006