


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000038981 1. Entity Name NCRFM CAPITAL HOLDINGS, L.L.C.	
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Principal Place of Business 10000 S.W. 56 STREET, S TE. 32 MIAMI, FL 33165	Mailing Address 10000 S.W. 56 STREET, S TE. 32 MIAMI, FL 33165
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DO NOT WRITE IN THIS SPACE



03152006 No Chg-LLC

CRZE083 (11/05)

4. FEI Number 56-2462132	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent QUINTANA, J. LUIS 338 MINORCA AVENUE CORAL GABLES, FL 33134
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**DO NOT WRITE
IN THIS SPACE**

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

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

1000000475858
04/05/06-80033-014 55.00

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, P. NELSON 10000 S.W. 56 STREET, S TE. 32 MIAMI, FL 33165
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IN THIS SPACE**

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:  **03/17/06** **(305) 595-8220**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #