

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000013623**

1. Entity Name  
**CHRISXAVI, LLC**



Principal Place of Business  
**12770 WESTWOOD LAKES BLVD.  
TAMPA, FL 33626 US**

Mailing Address  
**12770 WESTWOOD LAKES BLVD.  
TAMPA, FL 33626 US**



D2032006 No Chg-LLC

CR2E063 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**STROHAUER, GARY N  
1150 CLEVELAND STREET  
SUITE 300  
CLEARWATER, FL 33755**

**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 reinstating)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
MILLAN, ERNESTO J  
12770 WESTWOOD LAKES BLVD.  
TAMPA, FL 33626**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
OLMEDA-MILLAN, JANNISSE  
12770 WESTWOOD LAKES BLVD.  
TAMPA, FL 33626**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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04/14/06-80020-009 50.00

**DO NOT WRITE  
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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 609, Florida Statutes.

SIGNATURE: \_\_\_\_\_

*Jannisse Olmeda-Millan*

3/28/2006