


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**May 10, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L04000023337</b> 1. Entity Name OOPABABY, LLC	
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Principal Place of Business 4151 WOODRIDGE ROAD MIAMI, FL 33133 US	Mailing Address 4151 WOODRIDGE ROAD MIAMI, FL 33133 US
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04202006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 74-3119137	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  ABREU, AMY H 4151 WOODRIDGE ROAD MIAMI, FL 33133
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstalling) DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ABREU, AMY H 4151 WOODRIDGE ROAD MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ABREU, PEDRO L 4151 WOODRIDGE ROAD MIAMI, FL 33133
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05/20/06-80133-010 50.00

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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: \_\_\_\_\_  5-8-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #