

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90052 033 ****55.00



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Entity Name
 HIALEAH SERVICES II, LLC

Principal Place of Business
 105 EAST 21ST STREET
 HIALEAH, FL 33010

Mailing Address
 P.O. BOX 158
 HIALEAH, FL 33011



03242006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 65-1002642

Applied For
 Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BRUNETTI, STEPHEN P
 105 EAST 21ST STREET
 HIALEAH, FL 33010

**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	MGR
NAME	GIBRALTAR INVESTMENT & SECURITIES CORP
STREET ADDRESS	1655 US HWY 9
CITY-ST-ZIP	OLD BRIDGE, NJ 08857

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

**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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING-MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE


 Date

Daytime Phone # _____