


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000004316 1. Entity Name THE FOUNTAIN HOLDINGS, L.C.	
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Principal Place of Business 2921 S.W. 27TH AVENUE COCONUT GROVE, FL 33133	Mailing Address 2921 S.W. 27TH AVENUE COCONUT GROVE, FL 33133
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04202006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1056603	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

MELAND & RUSSIN, P.A.
200 SOUTH BISCAYNE BLVD.
2420 FIRST UNION FINANCIAL CENTER
MIAMI, FL 33131

**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	MGRM
NAME	KAMILAR, MARK
STREET ADDRESS	2921 S.W. 27TH AVENUE
CITY - ST - ZIP	COCONUT GROVE, FL 33133
TITLE	MGRM
NAME	TORRES, RICARDO
STREET ADDRESS	2921 S.W. 27TH AVENUE
CITY - ST - ZIP	COCONUT GROVE, FL 33133
TITLE	MGRM
NAME	UTNER, DIETER
STREET ADDRESS	2921 S.W. 27TH AVENUE
CITY - ST - ZIP	COCONUT GROVE, FL 33133
TITLE	MGRM
NAME	SHEAR, GARY
STREET ADDRESS	6817 SW 81ST TERR
CITY - ST - ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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05/06/06-80039-022 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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

7/20/06 305-567-1112
Date Daytime Phone #