


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000008142 1. Entity Name ALPINE JAGUAR, L.L.C.	
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Principal Place of Business 6606 NORTH ANDREWS AVE. FORT LAUDERDALE, FL 33309	Mailing Address 6606 NORTH ANDREWS AVE. FORT LAUDERDALE, FL 33309
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DO NOT WRITE IN THIS SPACE



01282005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1112806	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ULBRICH, JOHN O 6606 NORTH ANDREWS AVE. FORT LAUDERDALE, FL 33309	DO NOT WRITE IN THIS SPACE
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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

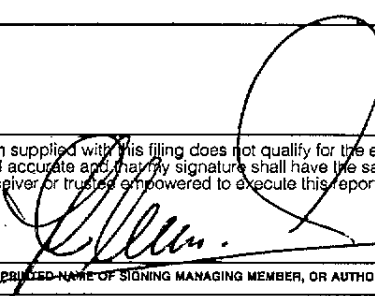
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ULBRICH, JOHN 1900 N. ATLANTIC BLVD. FORT LAUDERDALE, FL 33305
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/13/05-80086-012 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **JOHN ULBRICH** 4/9/05 9545656601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #