


**2006 LIMITED LIABILITY COMPANY
ANNUAL-REPORT**

FILED
Apr 24, 2006 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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03132006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1112806	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent ULBRICH, JOHN O 6606 NORTH ANDREWS AVE. FORT LAUDERDALE, FL 33309
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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 _____

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 ULBRICH, JOHN 1900 N. ATLANTIC BLVD. FORT LAUDERDALE, FL 33305
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**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

JOHN ULBRICH

4/20/06

Date

954 296 5139

Daytime Phone #