


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90195 006 ****50.00

DOCUMENT # L00000013633 1. Entity Name RENAISSANCE APARTMENTS, LLC	
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Principal Place of Business 8500 SW 8TH STREET SUITE 228 MIAMI, FL 33144	Mailing Address 8500 SW 8TH STREET SUITE 228 MIAMI, FL 33144
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DO NOT WRITE IN THIS SPACE



02012006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1052302	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 MACHADO, JOSE L 8500 SW 8TH ST SUITE 238 MIAMI, FL 33144
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VICTORIA REAL ESTATE MANAGEMENT INC. 8500 SW 8TH ST., SUITE 228 MIAMI, FL 33144
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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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date <u>2-10-06</u> <small>Daytime Phone #</small>
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