

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90089 039 ****50.00

DOCUMENT # L00000014259
 1. Entity Name
 LE JEUNE - DOUGLAS INDUSTRIAL PARK, LLC



Principal Place of Business: 13105 NW LEJEUNE ROAD, OPA LOCKA, FL 33054
 Mailing Address: 13105 NW LEJEUNE ROAD, OPA LOCKA, FL 33054

20006102



01092006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1069413	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
 SEIF, EVAN D
 2800 PONCE DE LEON BLVD., STE. 1125
 MIAMI, FL 33134

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.

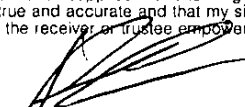
SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOLLAND, BRIAN 13105 NW LEJEUNE ROAD OPA LOCKA, FL 33054
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHAPLIN, WAYNE 13105 NW LEJEUNE ROAD OPA LOCKA, FL 33054
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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:  Date: 2/1/06 Daytime Phone # _____

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE