

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002367

Entity Name: ZMC LLC

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

2501 NORTHWEST 29 DR
BOCA RATON, FL 33434

New Principal Place of Business:

2501 NW 29TH DR
BOCA RATON, FL 33434

Current Mailing Address:

2501 NORTHWEST 29 DR
BOCA RATON, FL 33434

New Mailing Address:

2501 NW 29TH DR
BOCA RATON, FL 33434

FEI Number: 65-1075635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

DIAZ, NARCIZA
2501 NW 29TH DR
BOCA RATON, FL 33434 US

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.

SIGNATURE: NARCIZA DIAZ

04/24/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DIAZ, TEODULO
Address: 2501 NORTHWEST 29TH DR.
City-St-Zip: BOCA RATON, FL 33434

Title: MGR () Delete
Name: DIAZ, NARCIZA
Address: 2501 NORTHWEST 29TH DR.
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DIAZ, TEODULO
Address: 2501 NW 29TH DR.
City-St-Zip: BOCA RATON, FL 33434

Title: MGR (X) Change () Addition
Name: DIAZ, NARCIZA
Address: 2501 NW 29TH DR.
City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: NARCIZA DIAZ

MGR

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date