

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90014 038 ****50.00

DOCUMENT # L01000002785					
1. Entity Name ARIZALA INTERNATIONAL LLC					
Principal Place of Business 7734 W HILLSBOROUGH AVE TAMPA, FL 33615			Mailing Address 7508 BOLANOS CT TAMPA, FL 33615		
2. Principal Place of Business 7508 BOLANOS CT		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State TAMPA, FLORIDA		City & State		4. FEI Number 59-3700551	
Zip 33615		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ARIZELA, MARIA L 7508 BOLANOS CT TAMPA, FL 33615			7. Name and Address of New Registered Agent Name MARIA ARIZALA Street Address (P.O. Box Number is Not Acceptable) 7508 BOLANOS CT City TAMPA FL FL Zip Code 33615		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARIZALA, MARIA L 7508 BOLANOS CT TAMPA, FL 33615	<input type="checkbox"/> Delete			
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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:		MARIA ARIZALA		4/18/2006 243-4030	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>		<small>Daytime Phone #</small>	