

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000003681

1. Entity Name
TRADERS OCEAN RESORT 1993, L.L.C.



Principal Place of Business
RAMADA INN
FT LAUDERDALE, FL 33308

Mailing Address
4060 GALT OCEAN DR
FT LAUDERDALE, FL 33308



02012006No Chg-LLC

CR2E083 (11/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1095717

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HANNA, PETER N
1800 S. OCEAN BLVD, #1406
POMPANO BEACH, FL 33062

**DO NOT WRITE
IN THIS SPACE**

6. 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 obligation of, registered agent.

SIGNATURE

Signature of the person who is the registered agent or officer.

(NOTE: If the Agent's signature is required when filing this report.)

DATE

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

7. MANAGING MEMBERS/MANAGERS

NAME	P
STREET ADDRESS	FOUAD, KABRITA
CITY-STATE-ZIP	4060 GALT OCEAN DRIVE FORT LAUDERDALE, FL 33308
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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02/15/06-80042-022 50.00

**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 110, 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 606, Florida Statutes.

SIGNATURE

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

Feb 1/2006 (954)565-6611

FILE

FILED