## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L01000005906**

Entity Name

ELYSEE INVESTMENT ENTERPRISES, LLC



Principal Place of Business

210 - 71ST STREET, STE 309 MIAMI BEACH, FL 33141 Mailing Address

ONE FINANCIAL PLAZA SUITE 2001 FORT LAUDERDALE, FL 33394

## FILED Mar 21, 2006 8:00 am Secretary of State

03-21-2006 90294 029 \*\*\*\*50.00

2001819G



03082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1094953 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

PIOTRKOWSKI, JOEL S 317 71ST STREET MIAMI BEACH, FL 33141

DO	NOT	WRITE
IN	THIS	SPACE

Date

Daytime Phone #

<ol> <li>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.</li> </ol>				
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
	ling Fee is \$50.00 ue by May 1, 2006			
9.	. : MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	YEHEZKEL, HAIM			
STREET ADDRESS	210 71ST STREET, STE 309			
CITY-ST-ZIP	MIAMI BEACH, FL			
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP	VEDVDT	CTATE		
TITLE		CTOTE		
NAME				
STREET ADDRESS		DO NO.	Γ WRITE	
CITY-ST-ZIP		יטא טע	I AALLIE	
TITLE		IN THIS	SPACE	
NAME		114 11110	GRACE	
STREET ADDRESS				
CITY:ST-ZIP:	· <del> ·</del> · _ ·			
TITLE				
NAME		1		
STREET ADDRESS		1	•	
CITY-ST-ZIP				
TITLE				
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling 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 empoyered to execute this report as required by Chapter 608, Florida Statutes.				

ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE