## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000007798

1. Entity Name CENTURY CAPITAL PARTNERS, LLC



**FILED** Feb 27, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

330 CLEMATIS STREET #217 WEST PALM BEACH, FL 33401 330 CLEMATIS STREET #217 WEST PALM BEACH, FL 33401



01202006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1103105

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

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8.	Name and	Address of Currer	nt Registere	d Agent

330 CLEM SUITE 217	r, LAURA E ESQ. NATIS STREET 7 LM BEACH, FL 33401	_	DO NOT WRITE IN THIS SPACE	
8. The above the obligat	e named entity submits this statement for the purpose of cha tions of registered agent.	inging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accep	
SIGNATURE.	Signature, typed or printed name of registered agent and the if applicable	(NOTE. Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2006			
9. TITLE	MANAGING MEMBERS/MANAGERS MGRM			
MAME	ANTHONY, MICHAEL			
STREET ADDRESS	1501 S. FLAGLER DR. #6-H			
CTTY-ST-ZIP	WEST PALM BEACH, FL 33401			
TITLE			ടില്സ്ത്രിക്കുക (സ്യയ്)	
NAME Street address		1	HBBBB <b>447620</b> B <b>3/B8/06-80064-006-50.00</b>	
CITY-ST-ZIP			50 000 POOO POOOO OO 100	
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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 madelunder oath; that I am a managing member or manager of the limited liability companylor the receiver or trustee empowered to execute this report as required by Chapter 609, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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