2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000009166

1. Entity Name
VICAMM INVESTMENTS LLC

Principal Place of Business
6899 SW 50TH STREET
DAVIE, FL 33314

Mailing Address
6899 SW 50TH STREET
DAVIE, FL 33314

DO NOT WRITE IN THIS SPACE

01092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
65-1131548
Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SEXTON, DAVID WILSON JR.
6899 SW 50TH STREET
DAVIE, FL 33314

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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 ______________________________
Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Agent signature required when changing.)

H06000045590
03/16/06-80006-013 50.00

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEXTON, DAVID W JR 6899 SW 50TH STREET DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEXTON, ANTONIA MARIE 6899 SW 50TH STREET DAVIE, FL 33314
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: David W. Sexton Jr [signature] 3/02/06 754 979 0707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #