

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000014470

1. Entity Name  
V.A.C. BUILDERS, L.L.C.



Principal Place of Business

10300 SW 72 STREET  
SUITE 318  
MIAMI, FL 33173

Mailing Address

10300 SW 72 STREET  
SUITE 318  
MIAMI, FL 33173



02102006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
85-1134500

Added For  
Not Assessable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VALDERRAMA, JUAN LUIS  
10300 SW 72 ST., #318  
MIAMI, FL 33173

**DO NOT WRITE  
IN THIS SPACE**

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 of each or former names of registered agent and file if applicable.

(NOTE: Registered Agent's signature required when Amending)

Date

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

9. MANAGING MEMBERS/MANAGERS

|                |                               |
|----------------|-------------------------------|
| TITLE          | D                             |
| NAME           | SANTA MONICA DEVELOPMENT CORP |
| STREET ADDRESS | 10300 SW 72 ST., #318         |
| CITY-ST-ZIP    | MIAMI, FL 33173               |
| TITLE          | D                             |
| NAME           | INTEGRAL BUSINESS AND INVEST  |
| STREET ADDRESS | 10300 SW 72 ST., #318         |
| CITY-ST-ZIP    | MIAMI, FL 33173               |
| TITLE          | D                             |
| NAME           | SANTA LUCIA DEVELOPMENT CORP  |
| STREET ADDRESS | 10300 SW 72 ST., #318         |
| CITY-ST-ZIP    | MIAMI, FL 33173               |
| TITLE          |                               |
| NAME           |                               |
| STREET ADDRESS |                               |
| CITY-ST-ZIP    |                               |
| TITLE          |                               |
| NAME           |                               |
| STREET ADDRESS |                               |
| CITY-ST-ZIP    |                               |

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04/12/06 80081-023 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 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, then 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

3/27/06