


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2006 8:00 am
Secretary of State

01-09-2006 90051 039 ****55.00

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DOCUMENT # L01000018257			
1. Entity Name CARES INVESTMENTS, L.L.C.			
Principal Place of Business 14011 NW 13 STREET PEMBROKE PINES, FL 33028 US		Mailing Address 14011 NORTHWEST 13TH STREET PEMBROKE PINES, FL 33028 US	
2. Principal Place of Business 19038 Park Ridge ST Suite, Apt. #, etc. Weston, Florida City & State 33332 Broward Zip Country U.S.A		3. Mailing Address 19038 Park Ridge ST Suite, Apt. #, etc. Weston, Florida City & State 33332 Zip Country U.S.A	
4. FEI Number 65-1149291		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent CARDENAS, RAMIRO 14011 NORTHWEST 13TH STREET PEMBROKE PINES, FL 33028		7. Name and Address of New Registered Agent Name CARDENAS, RAMIRO Street Address (P.O. Box Number is Not Acceptable) 19038 Park Ridge ST City Weston FL Zip Code 33332	
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 <u>Ramiro Q. Ramiro Cardenas</u> DATE <u>1/5/2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARDENAS KEY, RAMIRO JOSE 14011 NW 13 STREET PEMBROKE PINES, FL 33028 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARDENAS KEY, RAMIRO 19038 Park Ridge ST Weston, FL 33332 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ESTRADA DE CARDENAS, RITA ELENA 14011 NW 13 STREET PEMBROKE PINES, FL 33028 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ESTRADA DE CARDENAS, RITA ELENA 19038 Park Ridge ST Weston, FL 33332 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>Ramiro Q. Ramiro Cardenas</u>		DATE: <u>1/5/2006</u> DAYTIME PHONE: <u>9549931951</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			