

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 06, 2006 08:00 AM**  
**Secretary of State**

|                                                     |                                                                                   |
|-----------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT #</b> L01000020023                      |  |
| <b>1. Entity Name</b><br>LA ROSA PROPERTIES, L.L.C. |                                                                                   |

|                                                                         |                                                             |
|-------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>Principal Place of Business</b><br>2050 NW 95 AVE<br>MIAMI, FL 33172 | <b>Mailing Address</b><br>2050 NW 95 AVE<br>MIAMI, FL 33172 |
|-------------------------------------------------------------------------|-------------------------------------------------------------|



01132006 No Chg-LLC

CRZE083 (11/05)

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|                                    |                                      |
|------------------------------------|--------------------------------------|
| <b>4. FEI Number</b><br>65-1154119 | <b>Applied For</b><br>Not Applicable |
|------------------------------------|--------------------------------------|

|                                                                  |                                       |
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| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> | <b>\$5.00 Additional Fee Required</b> |
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|                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------|
| <b>6. Name and Address of Current Registered Agent</b><br><br>AMADOR, CLARA R<br>18636 NW 78TH PLACE<br>MIAMI, FL 33015 |
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| <b>DO NOT WRITE IN THIS SPACE</b> |
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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** Clara Amador 4/4/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

| 8. MANAGING MEMBERS/MANAGERS                                               |                                                                   |
|----------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>P</b><br>AMADOR, CLARA<br>18636 NW 78 PL<br>MIAMI, FL 33015    |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | <b>P</b><br>LA ROSA, MIGDALE<br>18636 NW 78 PL<br>MIAMI, FL 33015 |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |                                                                   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |                                                                   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |                                                                   |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |                                                                   |

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| <b>DO NOT WRITE IN THIS SPACE</b> |
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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 606, Florida Statutes.

**SIGNATURE:** Clara Amador 4/4/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #