

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011020

Entity Name: STANI'S GARAGE, LLC

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

19390 COLLINS AVE.
322A
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

19390 COLLINS AVE.
322A
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

2332 GALIANO STREET
2ND FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

P.O BOX 800621
AVENTURA, FL 33280

FEI Number: 01-0685333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRIQUES, EDUARDO J
11111 BISCAYNE
#1551
NORTH MIAMI, FL 33181 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HENRIQUES, CARLOS
Address: 19390 COLLINS AVE. #322A
City-St-Zip: SUNNY ISLES, FL 33160

Title: MGR () Delete
Name: CENTENO, MARIA A
Address: 19390 COLLINS AVE. #322
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HENRIQUES, CARLOS
Address: P.O BOX 800621
City-St-Zip: AVENTURA, FL 33280

Title: MGR (X) Change () Addition
Name: CENTENO, MARIA A
Address: P.O BOX 800621
City-St-Zip: AVENTURA, FL 33280

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CARLOS HENRIQUES

MGR

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date