

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016363

FILED  
Mar 21, 2006  
Secretary of State

Entity Name: COVEMONT CO, LLC

**Current Principal Place of Business:**

6501 NW 36 STREET  
101  
VIRGINIA GARDENS, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

6501 NW 36 STREET  
101  
VIRGINIA GARDENS, FL 33166 US

**New Mailing Address:**

FEI Number: 22-3884894      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POZO, ZAEDY R  
2655 LE JEUNE ROAD, PENTHOUSE ID  
CORAL GABLES, FL 33134 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: MGRM ( ) Delete  
Name: POZO, ZAEDY R  
Address: 2655 LEJEUNE ROAD, PENTHOUSE ID  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM ( ) Delete  
Name: TARAFA, ROBERTO M  
Address: 6501 NW 36 STREET, SUITE 101  
City-St-Zip: VIRGINIA GARDENS, FL 33166 US

Title: MGRM ( ) Delete  
Name: TARAFA, JOVANNI R  
Address: 6501 NW 36 STREET, SUITE 101  
City-St-Zip: VIRGINIA GARDENS, FL 33166 US

Title: MGRM ( ) Delete  
Name: TARAFA, ROBERTO C  
Address: 6501 NW 36 STREET, SUITE 101  
City-St-Zip: VIRGINIA GARDENS, FL 33166 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERTO TARAFA

MR.

03/21/2006

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