


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

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**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90031 007 \*\*\*\*50.00

DOCUMENT # L02000019991 1. Entity Name ORLI, LLC	
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Principal Place of Business 16105 N.E. 18TH AVENUE NORTH MIAMI BEACH, FL 33162	Mailing Address 16105 N.E. 18TH AVENUE NORTH MIAMI BEACH, FL 33162
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30005798



01052006No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 41-2118960	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RONES, VICTOR K  
16105 N.E. 18TH AVENUE  
NO. MIAMI BEACH, FL 33162

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSENFELD FRIEDSTADT, ENRIQUE 16105 NE 18 AVE N MIAMI BEACH, FL 33162
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ORGLER, LILI FRIEDSTAC 16105 N.E. 18TH AVENUE NORTH MIAMI BEACH, FL 33162
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**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; that I am a managing member or manager of the limited liability company or the recorder or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X [Signature] Date: 4/19/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #