

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024320

Entity Name: CHAKAY SERVICES, L.L.C.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

17890 WEST DIXIE HWY
SUITE 109
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

16300 NE 19 AVE
STE C
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 51-0428823

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA'S ENTERPRISE, INC
16300 NE 19 AVE
STE C
NORTH MIAMI BEACH, FL 33162 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/MEMBERS:

Title: MGR () Delete
Name: ROSMAN, GABRIELA A
Address: 17890 WEST DIXIE HWY # 109
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGR () Delete
Name: GENIJOVICH, JULIAN P
Address: 17890 WEST DIXIE HWY # 109
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES:

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 Section 119.07(3)(i), 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: JULIAN GENIJOVICH

MGR

04/27/2005

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