2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027615

Title:

Name:

Address:

City-St-Zip:

MGR

CASERTA, DAVID T

12121 NE 16 AVENUE

(X) Delete

PEMBROKE PINES, FL 33161

Entity Name: TRI-COUNTY VENTURES, LLC

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12121 NE 16 AVENUE NORTH MIAMI, FL 33161 **Current Mailing Address: New Mailing Address:** 12121 NE 16 AVENUE NORTH MIAMI, FL 33161 FEI Number: 74-3067216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CASO CASERTA, MARIA R 4539 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33146 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CASERTA, ANTHONY D Name: Name: 12121 NE 16 AVENUE Address: Address: City-St-Zip: NORTH MIAMI, FL 33161 US City-St-Zip: Title: MGR () Delete Title: MEM (X) Change () Addition Name: CASERTA, ANTHONY S Name: CASERTA, ANTHONY S Address: 12121 NE 16 AVENUE Address: 12121 NE 16 AVENUE City-St-Zip: NORTH MIAMI, FL 33161 City-St-Zip: NORTH MIAMI, FL 33161 Title: MGR (X) Delete Title: () Change () Addition CASERTA, FRANK F Name: Name: 12121 NE 16 AVENUE Address: Address: City-St-Zip: NORTH MIAMI, FL 33161 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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: ANTHONY D CASERTA MGRB 04/26/2006