2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2006
Secretary of State

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Entity Name: EZ - VACATIONS, L.L.C.

Current Principal Place of Business:

10939 WOODCHASE CIRCLE
ORLANDO, FL 32836

New Principal Place of Business:

Current Mailing Address:

10939 WOODCHASE CIRCLE
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 42-1559354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEMANI, NASIRUDDIN
10939 WOODCHASE CIRCLE
ORLANDO, FL 32836 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:	HEMANI, NASIRUDDIN	
Address:	10939 WOODCHASE CIRCLE	
City-St-Zip:	ORLANDO, FL 32836	
Title:	MGRM	( ) Delete
Name:	HEMANI, ALTAF	
Address:	914 ELMDALE RD	
City-St-Zip:	GLENVIEW, IL 60025	
Title:	MGRM	( ) Delete
Name:	HEMANI, NIZAR (NICK)	
Address:	9102 SOUTHERN BREEZE DR	
City-St-Zip:	ORLANDO, FL 32836	
Title:	MGRM	( ) Delete
Name:	HEMANI, MIZAR	
Address:	5525 OXFORDMOOR	
City-St-Zip:	WINDERMERE, FL 34786	
Title:	MGRM	( ) Delete
Name:	HEMANI, MOHAMMED	
Address:	18250 KESTREL CT	
City-St-Zip:	BROOKFIELD, WI 53045	

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:	
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: NIZAR HEMANI MGRM 01/10/2006

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