


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90087 026 ****50.00

DOCUMENT # L02000030937 1. Entity Name JOSHUA TREE ESTATES LLC					
Principal Place of Business 555 N.E. 15TH STREET, SUITE 7719 MIAMI, FL 33132			Mailing Address C/O ALEXANDER CPA 25 TOWE RD, # 2 PEEKSKILL, NY 10566		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address % L. Alexander CPA 2 Stowe Road Suite 2 Peekskill NY 10566 USA			
City & State		4. FEI Number 86-1091477			
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GIBBS, SALAAM 555 N.E. 15TH STREET, SUITE 7719 MIAMI, FL 33132			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GIBBS, VAN 555 N.E. 15TH STREET, SUITE 7719 MIAMI, FL 33132 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>L. Alexander</i>			1/23/06 (914) 788-9128		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		