

Apr. 28. 2006 10:51AM

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

No. 4544 P. 6
FILED

May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000030946

1. Entity Name
GROVE HAUS, LLC



Principal Place of Business
**6150 SW 76TH STREET
MIAMI, FL 33143**

Mailing Address
**6150 SW 76TH STREET
MIAMI, FL 33143**



04282006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3667991

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BYRNE, THOMAS E
6150 SW 76 ST
MIAMI, FL 33143**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when resigns (Rsg))

DATE _____

**Filing Fee is \$60.00
Due by May 1, 2006**

9. **MANAGING MEMBERS/MANAGERS**

TITLE	D
NAME	BYRNE, THOMAS E
STREET ADDRESS	6150 SW 76TH ST
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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 receiver or trustee empowered to execute this report as required by Chapter 885, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/27/06