

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031127

FILED
Feb 02, 2006
Secretary of State

Entity Name: TORREMARE, LLC

Current Principal Place of Business:

151 NE 5TH AVE
STE 151
DELRAY BEACH, FL 33483 US

Current Mailing Address:

151 NE 5TH AVE
STE 151
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

117- A N.E 5TH AVENUE
STE 117
DELRAY BEACH, FL 33483 US

New Mailing Address:

117- A N.E 5TH AVENUE
STE 117
DELRAY BEACH, FL 33483 US

FEI Number: 82-0574362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE, SUITE 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MICHAEL ORTIZ, PA
2121 PONCE DE LEON BOULEVARD
SUITE 330
CORAL GABLES, FL 33134 US

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: MICHAEL ORTIZ

02/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: CARVALLO, VICTOR
Address: 5341 FISHER ISLAND DRIVE
City-St-Zip: MIAMI, FL 33109

Title: VP () Delete
Name: CARVALLO, JESUS
Address: 2700 OAKBROOK LANE
City-St-Zip: WESTON, FL 33332

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 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: VICTOR CARVALLO

P

02/02/2006

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