

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90119 001 ***660.00

DOCUMENT # L02000032841

1. Entity Name
JIRUSKA DEVELOPMENT, LLC



Principal Place of Business
**66 NORTH ATLANTIC AVENUE, #205
COCOA BEACH, FL 32931 US**

Mailing Address
**66 NORTH ATLANTIC AVENUE, #205
COCOA BEACH, FL 32931 US**

30006829



03172006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0668781

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ZANA, YANE F MGRM
66 NORTH ATLANTIC AVENUE
SUITE 205
COCOA BEACH, FL 32931**

**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 reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ZANA, YANE F
STREET ADDRESS	66 N. ATLANTIC AVENUE
CITY - ST - ZIP	COCOA BEACH, FL 32931
TITLE	MGRM
NAME	SCALES, ROBERT
STREET ADDRESS	66 NORTH ATLANTIC AVE., SUITE 205
CITY - ST - ZIP	COCOA BEACH, FL 32931
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 608, Florida Statutes.

SIGNATURE: _____

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

Date

Daytime Phone #

5/1/06

(772) 5323418