2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L03000000770

DELGADO BROTHERS INVESTMENTS, LLC



FILED Mar 28, 2006 8:00 am Secretary of State

03-28-2006 90009 008 ****55.00

Principal Place of Business

6450 W 21 CT

#301

HIALEAH, FL 33016

Mailing Address

6450 W 21 CT #301

HIALEAH, FL 33016



03232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 27-0041329 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DELGADO, OSCAR J 6450 W 21 CT HIALEAH, FL 33016

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

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Date

Daytime Phone #

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SIGNATURE	Signature, typed or printed name of registered agent and title il applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELGADO, OSCAR J 6450 W 21 CT, #301 HIALEAH, FL 33016			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	DO NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this fill bees 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 any part of 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 trusted in 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 trusted in 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 trusted in 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 trusted in 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 of trusted in 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 of trusted in 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 of trusted in 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 of trusted in 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 of trusted liability company or the receiver				

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