

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000011132

1. Entity Name
CORRADINA ENTERPRISES, LLC



Principal Place of Business

4750 SOUTH OCEAN BOULEVARD NO. 110
HIGHLAND BEACH, FL 33487

Mailing Address

4750 SOUTH OCEAN BOULEVARD NO. 110
HIGHLAND BEACH, FL 33487



02082006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FCI Number
91-2190177

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

TOVAR, IIEANA ARIAS
WESTON TOWN CENTER
1725 MAIN STREET STE. 209
WESTON, FL 33326

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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 renewing)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	LICCIARDINO, MARIO
STREET ADDRESS	4750 SOUTH OCEAN BOULEVARD NO. 110
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	MGR
NAME	LICCIARDINO, HANSEL
STREET ADDRESS	4750 SOUTH OCEAN BOULEVARD NO. 110
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	MGR
NAME	LICCIARDINO, HAROLD
STREET ADDRESS	4750 SOUTH OCEAN BOULEVARD NO. 110
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	MGR
NAME	COLMENAREZ, BETTY
STREET ADDRESS	4750 SOUTH OCEAN BOULEVARD NO. 110
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/29/06-80243-003 50.00

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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:

0320 2006

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

Date

Daytime Phone #