## 2006 LIMITED LIABILITY COMPANY

## **ANNUAL REPORT**

**DOCUMENT # L03000011376** t. Entity Name SAN SOUCI, LLC

Mailing Address

16425 COLLINS AVNEUE, APT #2116 SUNNY ISLES, FL 33160 US

Principal Place of Business

2450 NE MIAMI GARDENS DRIVE **2ND FLOOR** NORTH MIAMI BEACH, FL 33180

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## **FILED** Feb 20, 2006 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

02152006 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

4. FEI Number 20-0544191

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

SUPRASKI, LOUIS A 2450 NE MIAMI GARDENS DRIVE 2ND FLOOR NORTH MIAMI BEACH, FL 33180

SIGNATURE:

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or bi	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature typed or printed name of registered egent and title if epplicable	(NOTE Registered Agent signature required when reinstating)	DATE
F	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
DITLE NAME STREET ACCRESS CHY-ST-ZP	MGRIM OAKLINE VENTURES LIMITED 16425 COLLINS AVENUE, APT. 2116 SUNNY ISLES, FL 33160		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1)00000439519 03/02/06 8008 <b>3</b> -022 <b>50.0</b> 0
name Sireet address City-St-Zip		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ABORESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-2IP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 further certify that the information indicated on this report is true and acquirate and that my signature shall have the same legal effect as if made under cath; 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE