2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000015878

1. Entity Name
DAQUIA, LLC

Principal Place of Business	Mailing Address
5084 SW 164 AVE MIRAMAR, FL 33027 US	5084 SW 164 AVE MIRAMAR, FL 33027 US

DO NOT WRITE IN THIS SPACE

01312006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-0011966	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ARANGUREN, JESUS
5084 SW 164 AVE
MIRAMAR, FL 33027

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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	MGR	
NAME	ARANGUREN, JESUS	
STREET ADDRESS	5084 SW 164 AVE	
CITY-ST-ZIP	MIRAMAR, FL 33027	
TITLE	MGR	
NAME	ESCOBAR, DIANA	
STREET ADDRESS	5084 SW 164 AVE	
CITY-ST-ZIP	MIRAMAR, FL 33027	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: _____   1/31/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #