

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90132 033 ****50.00



DOCUMENT # L03000020116

1. Entity Name
CLEMATIS LOUNGE, L.L.C.

| | |
|---|---|
| Principal Place of Business 1100 NORTH OLIVE AVE. WEST PALM BEACH, FL 33401 | Mailing Address 1100 NORTH OLIVE AVE. WEST PALM BEACH, FL 33401 |
|---|---|

DO NOT WRITE IN THIS SPACE



01112006No Chg-LLC CR2E083 (11/05)

| | |
|---|----------------|
| 4. FEI Number 77-0599222 | Applied For |
| | Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |

6. Name and Address of Current Registered Agent

WILLBUR, DEAN L JR
1100 NORTH OLIVE AVE.
WEST PALM BEACH, FL 33401

**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 _____

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

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY ST ZIP | MGRM GARCIA, FRANK 18809 SE WINDWARD ISLAND WAY JUPITER, FL 33458 |
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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: Frank Garcia

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