

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022041

Entity Name: AMERICARD, LLC

FILED  
Jan 05, 2006  
Secretary of State

**Current Principal Place of Business:**

100 S. PINE ISLAND ROAD  
116  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

100 S. PINE ISLAND ROAD  
116  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 51-0471177

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BERNARD M. CASSIDY, PA  
1 EAST BROWARD BOULEVARD  
1410  
FORT LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ANTONIO, EMMANUEL V  
Address: 10359 SW 54TH COURT  
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM ( ) Delete  
Name: PINKOFF, LAWRENCE D  
Address: 5721 OAKVIEW TERRACE  
City-St-Zip: HOLLYWOOD, FL 33312

Title: MGR ( ) Delete  
Name: JURIGA, JONATHAN  
Address: 417 SW 18TH AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: MGRM ( ) Delete  
Name: ANTONIO, THEOPHILOS  
Address: 151 N. NOB HILL ROAD, #231  
City-St-Zip: PLANTATION, FL 33324

Title: MGR ( ) Delete  
Name: KIJANSKI, ERICA J  
Address: 2426 NORTH 37TH AVENUE  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LAWRENCE PINKOFF

MGRM

01/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date