


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000023826 1. Entity Name PENGUIN ASSOCIATES, LLC	
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Principal Place of Business 3600 MYSTIC POINT DR #1613 AVENTURA, FL 33180	Mailing Address 3600 MYSTIC POINT DR #1613 AVENTURA, FL 33180
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DO NOT WRITE IN THIS SPACE



02122006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 51-0472722	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BUCALO, GLADYS 3600 MYSTIC POINT DR #1613 AVENTURA, FL 33180
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restoring)</small>	000000435905 02/27/06-80012-015 50.00
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Filing Fee is \$50.00 Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUCALO, GLADYS LOPEZ 3600 MYSTIC POINT DR #1613 AVENTURA, FL 33180
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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: <u><i>Gladys L. Bucalo</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>2/12/06</u> <u>(305) 933-6765</u> <small>Date Daytime Phone #</small>
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