2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000023956

ARLÉNJAYBAR EQUITIES, LLC



FILED Jan 20, 2006 08:00 AM Secretary of State

Principal Place of Business

150 WEST FLAGLER STREET

SUITE 2000 MIAMI, FL 33130 Mailing Address

150 WEST FLAGLER STREET **SUITE 2000**

MIAMI, FL 33130



01062006 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	02-0697595

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SOLOWSKY, JAY H ESQ. 150 WEST FLAGLER STREET **SUITE 2000**

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MIAMI, FL 33130		IN	IN THIS SPACE		
	named entity submits this statement for the purpose of cha tions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Agent signature required when reinstating)	DATE		
F	iling Fee is \$50.00 ue by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS	_			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SOLOWSKY, JAY H RA 150 WEST FLAGLER STREET, STE. 2000 MIAMI, FL 33130		U00000393393		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SOLOWSKY, JAY H RA 150 WEST FLAGLER STREET, STE. 2000 MIAMI, FL 33130		01/25/06-80019-012 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE		
TITLE NAME. STREET ADDRESS CITY-ST-ZIP					

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

305.371.2223

Daytime Phone #