



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90293 050 ****50.00

DOCUMENT # L03000024063			
1. Entity Name LOGOS INVESTMENTS, LLC			
Principal Place of Business 1937 E. ATLANTIC BLVD. #9 POMPANO BEACH FL 33060 US		Mailing Address 1937 E. ATLANTIC BLVD. #9 POMPANO BEACH FL 33060 US	
2. Principal Place of Business 2101 North Andrews Avenue - Ste 403 Wilton Manors, FL 33311		3. Mailing Address 2101 North Andrews Ave Suite 403 Wilton Manors, Florida	
Zip 33311	Country USA	Zip 33311	Country USA
6. Name and Address of Current Registered Agent BEESON, JR., JAMES M 1937 E. ATLANTIC BLVD. SUITE 9 POMPANO BEACH FL 33060		7. Name and Address of New Registered Agent 2101 North Andrews Avenue - Ste 107 Wilton Manors, FL 33311	
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 _____		DATE _____	
<p align="center">FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006</p>			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MORRIS, BRETT H 1937 E ATLANTIC BLVD, SUITE 9 POMPANO BEACH FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2101 North Andrews Avenue - Ste 107 Wilton Manors, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEESON, MARY C 1937 E ATLANTIC BLVD, SUITE 9 POMPANO BEACH FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2101 North Andrews Avenue - Ste 107 Wilton Manors, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CABBA, LLC 1937 E ATLANTIC BLVD, SUITE 9 POMPANO BEACH FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2101 North Andrews Avenue - Ste 403 Wilton Manors, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BEESON, JR., JAMES M 1937 E ATLANTIC BLVD, SUITE 9 POMPANO BEACH FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2101 North Andrews Avenue - Ste 107 Wilton Manors, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ABADI, CHAIM 1937 E ATLANTIC BLVD, SUITE 9 POMPANO BEACH FL 33060 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2101 North Andrews Avenue - Ste 403 Wilton Manors, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 

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

Date

Daytime Phone #