


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000024622 1. Entity Name GERMO FLORIDA I, L.L.C.	
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Principal Place of Business BOCA CORPORATE CENTRE, STE. 238 2300 CORPORATE BLVD. BOCA RATON, FL 33431	Mailing Address BOCA CORPORATE CENTRE, STE. 238 2300 CORPORATE BLVD. BOCA RATON, FL 33431
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03242006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2399958	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

MACLAREN, LINDA O
798 S. FEDERAL HWY., STE. 100
BOCA RATON, FL 33432

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SHUBIN, BILL 2300 NW CORPORATE BLVD #238 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NAZAROFF, BARBARA 1 ZEPHYRIRIDGE LAGUNA NIGUEL, CA 92677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NIKITIN, JANICE 1 PACIFIC CREST LAGUNA NIGUEL, CA 92677
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/06/06-80014-004 50.00

**DO NOT WRITE
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:  **April 1, 2006** ***561) 395-2228**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Bill Shubin