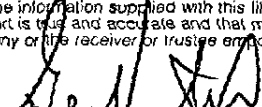


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L03000029809			
1. Entity Name JALA GA LLC			
Principal Place of Business 24009TH ST. NORTH STE 101 NAPLES, FL 34103		Mailing Address 24009TH ST. NORTH STE 101 101 NAPLES, FL 34103	
DO NOT WRITE IN THIS SPACE			
		02162006 No Chg-LLC CRZE083 (11/05)	
		4. FEI Number 16-1680673	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent PATEL, AJAY R 1647 MANCHESTER CT NAPLES, FL 34109		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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$50.00 Due by May 1, 2006			
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PATEL, AJAY R, PATEL SUNALI A, PATEL ROMA A 1647 MANCHESTER CT NAPLES, FL 34109		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VUKOBRATOVICH, GEORGE 2400 9TH ST/ C/O WELSH CO FL NAPLES, FL 34103		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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:  on manager JALA G.A.L.L.C. 2-20-06 239 261-4744		Date Daytime Phone #	