

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000030049

**FILED**  
**Jun 13, 2006**  
**Secretary of State**

**Entity Name:** HADDAD COMMODITIES TRADING, LLC

**Current Principal Place of Business:**

1790 WEST 49TH STREET, SUITE 205  
HIALEAH, FL 33014

**New Principal Place of Business:**

1342 WEST 76 STREET  
HIALEAH, FL 33014

**Current Mailing Address:**

1790 WEST 49TH STREET, SUITE 205  
HIALEAH, FL 33014

**New Mailing Address:**

1342 WEST 76 STREET  
HIALEAH, FL 33014

FEI Number: 56-2387412      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HADDAD, MICHAEL  
1790 WEST 49TH STREET, SUITE 205  
HIALEAH, FL 33014      US

**Name and Address of New Registered Agent:**

HADDAD, MICHAEL  
1342 WEST 76 STREET  
HIALEAH, FL 33014      US

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.

SIGNATURE: MICHAEL HADDAD

06/13/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: HADDAD, MICHAEL N  
Address: 1342 W 76 STREET  
City-St-Zip: HIALEAH, FL 33014

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MICHAEL HADDAD

MGR

06/13/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date