

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030612

FILED
Apr 19, 2006
Secretary of State

Entity Name: THE BIG BALD HEAD, L.L.C.

Current Principal Place of Business:

18851 NE 29TH AVE
STE 900
AVENTURA, FL 33180

New Principal Place of Business:

18851 NE 29TH AVE
STE 900
AVENTURA, FL 33180 US

Current Mailing Address:

18851 NE 29TH AVE
STE 900
AVENTURA, FL 33180

New Mailing Address:

18851 NE 29TH AVE
STE 900
AVENTURA, FL 33180 US

FEI Number: 20-1214400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, LEONARDO A ESQ
18851 NE 29TH AVE
STE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LUBEL, EVERARDO
Address: 18851 NE 29TH AVE, STE 900
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: LUBEL, CONRADO
Address: 18851 NE 29TH AVE, STE 900
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LUBEL, EVERARDO
Address: 18851 NE 29TH AVE, STE 900
City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM (X) Change () Addition
Name: LUBEL, CONRADO
Address: 18851 NE 29TH AVE, STE 900
City-St-Zip: AVENTURA, FL 33180 US

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: CONRADO LUBEL

MGMR

04/19/2006

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