

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000031092

**FILED**  
**Feb 02, 2006**  
**Secretary of State**

**Entity Name:** TREASURE CORNER COLLECTIBLES, LLC

**Current Principal Place of Business:**

7060 N.W. 50 ST.  
MIAMI, FL 33166

**New Principal Place of Business:**

7062 N.W. 50 ST.  
MIAMI, FL 33166

**Current Mailing Address:**

7060 N.W. 50 ST.  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 27-0066039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MENENDEZ, CHARLES A  
1571 BIRD RD.  
CORAL GABLES, FL 33146 US

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

VIERA, GUSTAVO A  
14821 SW 87 AV  
MIAMI, FL 33176 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: GUSTAVO VIERA

02/02/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ZANARDI, MONICA MGR  
Address: 10502 S.W. 134TH PLACE  
City-St-Zip: MIAMI, FL 33186

**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: MONICA ZANARDI

MGER

02/02/2006

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