2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2005
Secretary of State

DOCUMENT# L03000031176

Entity Name: PERROS GRANDES, LLC

Current Principal Place of Business:

26 SPOONBILL WAY
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

26 SPOONBILL WAY
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 20-0184091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARBAROSH, ZAK
26 SPOONBILL WAY
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

BARBAROSH, JUDI
26 SPOONBILL WAY
KEY WEST, FL 33040 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: JUDI BARBAROSH 02/05/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: BARBAROSH, ZAK
Address: 26 SPOONBILL WAY
City-St-Zip: KEY WEST, FL 33040

Title: MGR ( ) Delete
Name: BARBAROSH, GEORGE
Address: 26 SPOONBILL WAY
City-St-Zip: KEY WEST, FL 33040

Title: MGR ( ) Delete
Name: BARBAROSH, JUDY
Address: 26 SPOONBILL WAY
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change ( ) Addition
Name: BARBAROSH, JUDI
Address: 26 SPOONBILL WAY
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GEORGE BARBAROSH MGR 02/05/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date