2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039220

Entity Name: LOS ARBOLES LIMITED LIABILITY COMPANY

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18529 LONG LAKE DRIVE 21401 CRESTFALLS CT BOCA RATON, FL 33496 BOCA RATON, FL 33428

Current Mailing Address: New Mailing Address:

18529 LONG LAKE DRIVE P.O. BOX 970895

BOCA RATON, FL 33496 BOCA RATON, FL 33497

FEI Number: 20-0308271 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

 Title:
 MGR
 () Delete

 Name:
 SCHNEIDER, LAWRENCE M

 Address:
 18529 LONG LAKE DRIVE

 City-St-Zip:
 BOCA RATON, FL 33496

Title: MGR () Delete
Name: SCHNEIDER, ADAM N
Address: 18529 LONG LAKE DRIVE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition Name: SCHNEIDER, LAWRENCE M Address: 21401 CRESTFALLS CT City-St-Zip: BOCA RATON, FL 33428

Title: MGR (X) Change () Addition

Name: SCHNEIDER, ADAM N Address: 22360 SIESTA KEY DR City-St-Zip: BOCA RATON, FL 33428

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: ADAM N SCHNEIDER MGR 04/20/2006