2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000040351

1. Entity Name
VE AND EL OF DELRAY LLC

Principal Place of Business	Mailing Address
601 N. CONGRESS AVE. #403 DELRAY BEACH, FL 33445	601 N. CONGRESS AVE. #403 DELRAY BEACH, FL 33445

DO NOT WRITE IN THIS SPACE

04062006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
56-2455746

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ-MOSCOSO, ENRIQUE
601 N. CONGRESS AVE. #403
DELRAY BEACH, FL 33445

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LOPEZ MOSCOSO, ENRIQUE
STREET ADDRESS	601 N CONGRESS AVE STE 403
CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	MGRM
NAME	LOPEZ, VESNA
STREET ADDRESS	601 N CONGRESS AVE STE 403
CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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05/05/06-80118-006 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: X _____ X 4/20/06 (561)272-1618
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #