2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000044394

1. Entity Name GG LITTLE HAVANA LLC

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

Principal Place of Business C/OJOSHUAM.GOLDBERG 1101BRICKELLAVE,STE1005-S MIAMI,FL33131 Mailing Address

C/OJOSHUAM.GOLDBERG 1101BRICKELLAVE,STE1005-S MIAMI,FL33131



IOT WRITE IN THIS SPACE

07102006 No Chg-LLC CR2E083 (11/05)

4. FEI Number	Applied For	
20-0463282	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

LLOYD GRANET, P.A. 2295 NW CORPORATE BLVD, STE 235 BOCA RATON, FL 33431-7330

DO NOT WRITE IN THIS SPACE

	 above named entity submits this statement for the purpose of changi- obligations of registered agent. 	ng its registered office or registered agent, or both, in the	s State of Florida. I am familiar with, and accept			
SIGN	SIGNATURE					
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature regulaed when reinstating)	DATE			

Filing Fee is \$50.00 Due by September 6, 2006

000000572180 07/25/06-80019-015 50.00

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GUREN, SHELDON B 1101 BRICKELL AVE # 1005-S MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GOLDBERG, JOSHUA M 1101 BRICKELL AVE # 1005-S MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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 my problem or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #