## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000048407 1. Entity Name THE ALDALOME GROUP, LLC



FILED Mar 13, 2006 08:00 AM Secretary of State

Principal Place of Business

3208 COBBLESTONE DRIVE PACE, FL 32571 US Malling Address

3208 COBBLESTONE DRIVE PACE, FL 32571 US



DO NOT WRITE IN THIS SPACE

03022008 No Chg-LLC CR2E083 (11/05)

4. FEI Number 52-2409459 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEGALZOOM NEVADA INC 44 W. FLAGLER ST. SUITE 675 MIAMI, FL 33130

## DO NOT WRITE IN THIS SPACE

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  Signature, speed or printed name of registered agent and this if applicable.  [INTE: Registered Agent signature required when renotating)  DATE				
				Filing Fee is \$30.00 Due by May 1, 2006
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CATY-ST-ZIP	MGRM KISH, ROXANA K 3208 COBBLESTONE DRIVE PACE, FL 32571		H00000466308 03/23/06-80005-045 50.00 DO NOT WRITE	
title Name Street adoress City-St-Zip				
TITLE Name Street address City-St-Zip		DO		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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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 outh; that I am a managing member or manager of the limited liability company or the receiver or frustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NTPO NAME OF SIGNING MANAGING MELITER OF AUTHORIZED DEPOSESUTATION

L10,2000

X830-575-0152

Cate