LIMITED LIABILITY COMPANY ANNUAL REPORT (本年)

DOCUMENT # L03000048588 1. Entity Name CALIFANO LLC. DO NOT WRITE IN THIS



FILED Apr 03, 2006 8:00 am Secretary of State

04-03-2006 90075 018 ****50.00

DO NOT WRITE IN THIS SPACE 20024059

2. Principal Place of Business 5058 Bunyan St. Suite, Apt. #, etc.	3. Mailing Address 5058 Bunyan St, Suite, Apt. #, etc.		CR2E083B (8/05)	
City & State	City & State		4. FEI Number	Applied For
SARASOTA, FL. Zip Country 34232 U.S.A	SAEASOTA, FL 34232 CO	untry S.A	5. Certificate of Status Desired	Not Applicable \$5.00 Additional Fee Required
_		Name (7. Name and Address of Current Re Ent G. Californ	
IN THIS SPACE		Street Address (P.O. Box Number is Not Acceptable)		
		SOS8 BUNYAN St. City SARASOTA FL Zip Code 34232		
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 Signature, typed or printed same of registators agent and little if applicable.				4-1-06 DATE
FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1				
9. MANAGING MEMBER TITLE OWNER-MERM STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TI NA ST CCI	TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS	DO NOT W	
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

(941)724.5058