## **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

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## Apr 26, 2006 8:00 am Secretary of State 04-26-2006 90024 027 \*\*\*\*50.00 **DOCUMENT #L04000004241** 1. Entity Name CABÉZE, LLC ZUUJJUMA Principal Place of Business Mailing Address 2219 NW 43RD AVENUE 2219 NW 43RD AVENUE GAINESVILLE, FL 32605 GAINESVILLE, FL 32605 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03122006 Chg-LLC CR2E083 (11/05) City & State 4. FEI Number Applied For City & State 20-0901884 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JUSTICE, CHET D Street Address (P.O. Box Number is Not Acceptable) 2219 NW 43RD AVENUE GAINESVILLE, FL 32605 Zip Code 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 8. The above nar registered agept the obligation 04/24/2006 ed agent and title if applicable SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGRM Change ☐ Addition TITLE **X** Delete TITLE SEE ATTACHED JUSTICE, KRISTINA T NAME NAME STREET ADDRESS 2219 NW 43RD AVENUE STREET ADDRESS CITY-ST-ZIP GAINESVILLE, FL 32605 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 the receiver or trustee employeed to execute this report as required by Chapter 608, Florida Statutes.

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

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SIGNATURE:

TITLE NAME

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ING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

352 562 9310

☐ Change

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**FILED** 

ADDITIONS

ATTACHMENT 20035629 ++ L04000004241

MGRM Chester D. Justice 2219 NW 42ND PLACE Gainesville, FL 32605

MGR William Millard 6724 NW 24TH PLACE Gainesville, FL 32606

MGR Mike Zingaro 9024 SW 170TH STREET Archer, FL 32618

MGR Zac Zedalis 9678 SW 93RD PLACE Gainesville, FL 32608

MGR Chris Doering 3834 SW 92ND TERRACE Gainesville, FL 32608

MGR · Trek Hackney 2911 SW ARCHER ROAD Unit K98 Gainesville, FL 32605

MGR Michael P. Zaffaroni 10946 NW 31ST PLACE Gainesville, FL 32608

MGR William T. McGriff 11603 NW 16TH LANE Gainesville, FL 32606

MGR Michael DiBlasi 201 W. Laurel Street Unit 610 Tampa, FL 33602

MGR Ryan Gleichowski 5135 SW 105TH WAY Gainesville, FL 32608 MGR Daniel Gleichwoski 5135 SW 105TH WAY Gainesville, FL 32608

MGR James M. Justice 926 Monticello Court Venice, FL 34292

MGR Jason Millard 6724 NW 24TH PLACE Gainesville, FL 32606