2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000005223

1. Entity Name

ALEJANDRE PROPERTIES, LLC



FILED Feb 15, 2006 08:00 AM Secretary of State

Principal Place of Business

4141 SW 74 CT MIAMI, FL 33155 Malling Address

4141 SW 74 CT MIAMI, FL 33155



DO NOT WRITE IN THIS SPACE

02082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PAVE, STEPHEN M ESQ 7600 S RED RD, STE 200 MIAMI, FL 33143

DO NOT WRITE IN THIS SPACE

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 name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when terrisisting)	DATE
f D	lling Fee is \$50.66 ue by May 1, 2085		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALEJANDRE, MARGARITA 4141 SW 74 CT MIAMI, FL 33155	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			800000434551 02/25/06-80006-016 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-2P		IN	THIS SPACE
TITLE NAME STREET AUDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS GITY-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			

11. Ideaby certify that the information supplied with this slight oces not quality for the exemptions consisted on this report is true and accurate and that my signature shall have the same legal effect as if made under call; 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.