


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2006 8:00 am
Secretary of State

03-08-2006 90046 038 ****50.00

DOCUMENT # L04000009522	
1. Entity Name CHIRINOS VENTURES, LLC	

Principal Place of Business 7050 NORTHWEST 4TH STREET, SUITE 302 FORT LAUDERDALE, FL 33312	Mailing Address 7050 NORTHWEST 4TH STREET, SUITE 302 FORT LAUDERDALE, FL 33312
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00004343



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01122006 Chg-LLC CR2E083 (11/05)

4. FEI Number 34-2032674	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	
LAVENDER, JOEL R 507 S.E. 11TH COURT FORT LAUDERDALE, FL 33316	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2006	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHIRINOS, RODOLFO <input type="checkbox"/> Delete 7050 NORTHWEST 4TH STREET, SUITE 302 FORT LAUDERDALE, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHIRINOS, OTILIA <input type="checkbox"/> Delete 7050 NORTHWEST 4TH STREET, SUITE 302 FORT LAUDERDALE, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Chirinos* *Blumen* *2/20/06*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
P.O. BOX 9003
HOLTSVILLE NY 11742-9003

ATTACHMENT

30001522

L04000009522

006551.160889 0030.001 1 MB 0.309 702

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CHIRINOS VENTURES L L C
CHIRINOS RODOLFO SOLE MBR
7050 NW 4 ST 302
PLANTATION FL 33317

006551

Date of this notice: 02-02-2005

Employer Identification Number:
34-2032676

Form: SS-4

Number of this notice: CP 575 E

For assistance you may call us at:
1-800-829-4933IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.**WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER**

Thank you for applying for an EIN. We assigned you EIN 34-2032676. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records.
- * Use this EIN and your name exactly as they appear above on all your federal tax forms.
- * Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.