

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011912

Entity Name: LASAL HOLDINGS, LLC.

FILED
Feb 27, 2006
Secretary of State

Current Principal Place of Business:

2625 EXECUTIVE PARK DRIVE
SUITE 5
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

2625 EXECUTIVE PARK DRIVE
SUITE 5
WESTON, FL 33331

New Mailing Address:

FEI Number: 20-0761640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASCURAIN, EUGENIO
2625 EXECUTIVE PARK DRIVE
SUITE 5
WESTON, FL 33331 US

Name and Address of New Registered Agent:

EXIM BRICKELL
2625 EXECUTIVE PARK DRIVE
SUITE 5
WESTON, FL 33331 US

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.

SIGNATURE: ROGELIO SALGES

02/27/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LASCURAIN, EUGENIO
Address: 2625 EXECUTIVE PARK DRIVE
City-St-Zip: WESTON, FL 33331

Title: MGRM () Delete
Name: SALGES, ROGELIO
Address: 3617 TORREMOLINO AV
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES:

Title: M (X) Change () Addition
Name: LASCURAIN, EUGENIO
Address: 2625 EXECUTIVE PARK DRIVE
City-St-Zip: WESTON, FL 33331

Title: M (X) Change () Addition
Name: SALGES, ROGELIO
Address: 13051 SW 29 CT
City-St-Zip: DAVIE, FL 33330

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROGELIO SALGES

M

02/27/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date