

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000014915

FILED
Feb 08, 2006
Secretary of State**Entity Name:** AROMAS CIGAR & WINE BAR, LLC**Current Principal Place of Business:**880 A1A NORTH
SUITE 18-B
PONTE VEDRA BEACH, FL 32082 US**New Principal Place of Business:****Current Mailing Address:**107 PLANTERS ROW WEST
PONTE VEDRA BEACH, FL 32082 US**New Mailing Address:****FEI Number:** 20-0780716 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ARMSTRONG, DAN W
822 A1A NORTH
SUITE 303
PONTE VEDRA BEACH, FL 32082 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: DREICER, NANCY
Address: 107 PLANTERS ROW WEST
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US**Title:** MGRM () Delete
Name: MORROW, JAMES M
Address: 4649 GOLDEN SPIKE COURT
City-St-Zip: JACKSONVILLE, FL 32257 US**Title:** MGRM (X) Delete
Name: DREICER, JARRET P
Address: 107 PLANTERS ROW WEST
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: NANCY DREICER

MGRM

02/08/2006

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