## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L04000021671**

1. Entity Name

BALBINO INVESTMENTS II, LLC



FILED
Jan 12, 2006 08:00 AM
Secretary of State

Principal Place of Business

8991 NW 173RD TERRACE MIAMI, FL 33018 Mailing Address

8991 NW 173RD TERRACE

MIAMI, FL 33018



DO NOT WRITE IN THIS SPACE

01092006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2336813

Applied For Not Applicab

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ACOSTA, ANTONIO 8991 NW 173RD TERRACE MIAMI, FL 33018

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of cha- tions of registered agent.	anging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and ad
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2006		-
9.	MANAĞINĞ MEMBERS/MANAGERS		<del></del>
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGR ACOSTA, ANTONIO 8991 NW 173RD TERRACE MIAMI, FL 33018		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VINAS, ROBERTO 225 ALHAMBRA CIRCLE, SUITE 425 CORAL GABLES, FL 33134	-	Un0000385095 01/18/06-80002-025 50.00
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE			NOT WRITE
NAME	{	I IN	THIS SPACE

11. I hereby certify that the information supplied with this time toes not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and acquirate and that my significure shall have the same legal effect as if made under oath; that I am a managing member or manager of timelied liability company or the receiver or must be empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNALUBE AND TYPES OR REMITED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/9/00 805/ 345 307 C