

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000022946

Entity Name: ATANO REALTY SERVICES, LLC

FILED  
May 05, 2006  
Secretary of State

**Current Principal Place of Business:**

815 NW 57TH AVENUE  
SUITE 202  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

815 NW 57 AVENUE  
SUITE 202  
MIAMI, FL 33126

**New Mailing Address:**

FEI Number: 61-1468687      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ARRIZABALAGA, JAVIER  
7110 ROBLES STREET  
CORAL GABLES, FL 33143      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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ARRIZABALAGA, JAVIER  
Address: 7110 ROBLES STREET  
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM ( ) Delete  
Name: ARRIZABALAGA, MARGARITA M  
Address: 7110 ROBLES STREET  
City-St-Zip: CORAL GABLES, FL 33143

**ADDITIONS/CHANGES:**

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: JAVIER ARRIZABALAGA

MGRM

05/05/2006

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