


FILED
Jul 25, 2006 8:00 am
Secretary of State

06-23-2006 90270 001 ***100.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000023222			
1. Entity Name CANAAN LAND INVESTMENTS, LLC			
Principal Place of Business 1900 W. COMMERCIAL BLVD., STE. 112 FT. LAUDERDALE, FL 33309		Mailing Address PO BOX 190194 FT. LAUDERDALE, FL 33319	
2. Principal Place of Business 5300 NW 33 AVE Suite, Apt. #, etc. 205		3. Mailing Address SAME Suite, Apt. #, etc.	
City & State FT LAUDERDALE FL		City & State 1	
Zip 33309		Country U.S.A.	
4. FEI Number 20-0929650 APPLIED FOR		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
8. Name and Address of Current Registered Agent ISAAC, STAN 1900 W. COMMERCIAL BLVD., STE. 112 FT. LAUDERDALE, FL 33309		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 5300 NW 33 AVENUE City FT-LAUDERDALE FL Zip Code 33309	
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 <u>Stanley Isaac</u> STANLEY ISAAC 4/28/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)</small>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ISAAC, STANLEY 3540 NW 50 AVENUE, N302 LAUDERDALE LAKES, FL 33319 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3621 NW 40 ST. 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ISAAC, JOANNE C 3540 NW 50 AVENUE, N302 LAUDERDALE LAKES, FL 33319 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3621 NW 40 ST 33309
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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: <u>Stanley Isaac</u> 4/28/06 954 70-4334 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>			

JUUU14170



04282006 Chg-LLC CR2E083 (11/05)