## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L04000025615** 

1. Emilty Name INVERRAMA SHOPPING PLAZA LLC



FILED Mar 03, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

12913 NW 22 MANOR PEMBROKE PINES, FL 33028 12913 NW 22 MANOR PEMBROKE PINES, FL 33028



02232006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0972302 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

SASONI, MICHAEL 12913 NW 22ND MANOR PEMBROKE PINES, FL 33028

CITY-ST-ZP

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	named entity submits this statement for the purpose of chan tions of registered agent.	ging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accep-
SIGNATURE.			
	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Repistered Agent signature required when rehistating)	DATE
F	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		· · · · · · · · · · · · · · · · · · ·
TITLE HAME STREET ADURESS CITY-ST-ZIP	MGRM SASONI, MICHAEL 12913 NW 22ND MANOR PEMBROKE PINES, FL 33028		U00000454804 Na715706-80034-004 50.00
TITLE HAME STREET ADDRESS CITY-ST-ZIP	MGRM GRINBERG ENTERPRISES, INC. 12913 NW 22 MANOR PEMBROKE PINES, FL 33028		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN .	THIS SPACE
TITLE NAME STREET ADDRESS EITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

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 it 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: MANUAL ASSIMATION OF STORING MANAGING WEINER, OR AUTHORIZED REPRESENTATIVE

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