2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# L04000031295

Entity Name: ZEA ZEA & ASSOCIATES, LLC

Current Principal Place of Business:

1110 BRICKELL AVENUE, SUITE 404
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1110 BRICKELL AVENUE, SUITE 404
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-1074140 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA
2121 PONCE DE LEON BLVD
1050
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ZEA, MARGARITA
540 BRICKELL KEY DRIVE 1622
MIAMI, FL 33131 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: MARGARITA ZEA 02/15/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ZEA, HAROLD
Address: 2121 PONCE DE LEON BLVD. #1050
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete
Name: ZEA, MARGARITA
Address: 2121 PONCE DE LEON BLVD. #1050
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: CEO (X) Change ( ) Addition
Name: ZEA, HAROLD
Address: 1110 BRICKELL AVD SUITE 404
City-St-Zip: MIAMI, FL 33131

Title: VP (X) Change ( ) Addition
Name: ZEA, MARGARITA
Address: 4401 OLD CAVE SPRING
City-St-Zip: ROANOKE, VA 24018

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: MARGARITA ZEA VP 02/15/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date