


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 11, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L04000032046 1. Entity Name SURE WOOD, LLC |  |
|---|---|

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|---|---|
| Principal Place of Business 5758 SW 42ND TERRACE MIAMI, FL 33155 US | Mailing Address 5758 SW 42ND TERRACE MIAMI, FL 33155 US |
|---|---|

DO NOT WRITE IN THIS SPACE



07062006No Chg-LLC

CR2E083 (11/05)

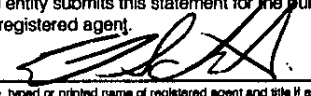
| | |
|---|--|
| 4. FEI Number NOT APPLICABLE | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

**SCHULTE, ERIK
5758 SW 42ND TERRACE
MIAMI, FL 33155**

**DO NOT WRITE
IN THIS SPACE**

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  DATE **09/06/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

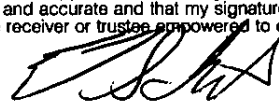
**Filing Fee is \$50.00
Due by September 6, 2006**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM SCHULTE, ERIK 5758 SW 42ND TERRACE MIAMI, FL 33155 |
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U00000576604
09/11/06-80001-016 55.00

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 606, Florida Statutes.

SIGNATURE:  **786-222-9663**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #