

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032296

Entity Name: CORR ENTERPRISES, LLC

FILED
Jul 14, 2006
Secretary of State

Current Principal Place of Business:

5421 S.W. 130TH AVENUE
MIRAMAR, FL 33027

New Principal Place of Business:

18520 N.W. 67TH AVENUE, SUITE 259
MIAMI, FL 33015

Current Mailing Address:

5421 S.W. 130TH AVENUE
MIRAMAR, FL 33027

New Mailing Address:

18520 N.W. 67TH AVENUE, SUITE 259
MIAMI, FL 33015

FEI Number: 06-1710895 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:

WENDY BREWSTER MAROUN
5421 S.W. 130TH AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

BREWSTER MAROUN, WENDY J
18520 N.W. 67TH AVENUE, SUITE 259
MIAMI, FL 33015 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: WENDY BREWSTER MAROUN

07/14/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WENDY BREWSTER MAROU, N
Address: 5421 S.W. 130TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BREWSTER MAROUN, WENDY J
Address: 18520 N.W. 67TH AVENUE
City-St-Zip: MIAMI, FL 33015

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: WENDY BREWSTER MAROUN

MGRM

07/14/2006

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