

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037689 1. Entity Name RAMMAL ENTERPRISES, LLC					
Principal Place of Business 6075 BISCAYNE BOULEVARD MIAMI FL 33137			Mailing Address 6075 BISCAYNE BOULEVARD MIAMI FL 33137		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 34-2024025 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent TOLEDO, RICHARD G 21 SE 1 AVENUE 10TH FLOOR MIAMI FL 33131				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ (NOTE: Registered Agent signature required when removing) _____ DATE _____					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RAMMAL, ALEX 6075 BISCAYNE BLVD. MIAMI FL 33137	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	U00000456802 03/16/06-80044-003 50.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RAMMAL, EDDIE 6075 BISCAYNE BLVD. MIAMI FL 33137	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RAMMAL, MICHAEL 6075 BISCAYNE BLVD. MIAMI FL 33137	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RAMMAL, ABBA 6075 BISCAYNE BLVD MIAMI FL 33137	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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>Ramchal Michael Rammal</u> 3-2-06 (305) 525454 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					