


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000043299**

1. Entity Name  
**ALYSSA REAL ESTATE, L.L.C.**



Principal Place of Business  
**16710 N.W. 84TH COURT  
 MIAMI LAKES, FL 33016**

Mailing Address  
**C/O IVAN A. GOMEZ, P.A.  
 601 BRICKELL KEY DRIVE, SUITE 507  
 MIAMI, FL 33131**

000000445295  
 03/07/06-80034-023 55.00



**DO NOT WRITE IN THIS SPACE**

01232008 No Chg-LLC      CR2E083 (11/05)

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

6. Name and Address of Current Registered Agent

**IAG CORPORATE SERVICES, INC.  
 601 BRICKELL KEY DRIVE, SUITE 507  
 MIAMI, FL 33131**

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

**Filing Fee is \$50.00  
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HERNANDEZ, REINALDO D 16710 NW 84TH COURT MIAMI LAKES, FL 33016
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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 608, Florida Statutes.

**SIGNATURE:** *Reinaldo D. Hernandez*      **Reinaldo D. Hernandez, President**      305-371-9213

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