

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000043587

Entity Name
COLK INVESTMENTS, LLC



Principal Place of Business
**1201 BRICKELL AVENUE, STE. 320
MIAMI, FL 33131 US**

Mailing Address
**1201 BRICKELL AVENUE, STE. 320
MIAMI, FL 33131 US**



01182006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-2158034

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GUTIERREZ, ARMANDO
1201 BRICKELL AVE STE 320
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GUTIERREZ, ARMANDO
STREET ADDRESS	1201 BRICKELL AVENUE, STE. 320
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	MGRM
NAME	GUTIERREZ, MARITZA
STREET ADDRESS	1201 BRICKELL AVENUE, STE. 320
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000397900
01/30/06-80070-013 55.00

**DO NOT WRITE
IN THIS SPACE**

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:

Armando Gutierrez

MANAGING MEMBER

1/18/06 (305) 350-49

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #