

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000048229

1. Entity Name
1930 YBOR CITY, LLC



Principal Place of Business
6960 NORTHWEST 3RD AVENUE
BOCA RATON, FL 33487

Mailing Address
6960 NORTHWEST 3RD AVENUE
BOCA RATON, FL 33487



03312006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
34-2002836

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON & AHSELMO
2455 EAST SUNRISE
SUITE 1000
FORT LAUDERDALE, FL 33-3014

**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

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**

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|---------------------------|
| TITLE | MGR |
| NAME | TSIALIAMANIS, PETER |
| STREET ADDRESS | 6960 NORTHWEST 3RD AVENUE |
| CITY-ST-ZIP | BOCA RATON, FL 33487 |
| TITLE | MGR |
| NAME | TSIALIAMANIS, KALLIOPE |
| STREET ADDRESS | 6960 NORTHWEST 3RD AVENUE |
| CITY-ST-ZIP | BOCA RATON, FL 33487 |
| TITLE | S |
| NAME | TSIALIAMANIS, PETER |
| STREET ADDRESS | 6960 NORTHWEST 3RD AVENUE |
| CITY-ST-ZIP | BOCA RATON, FL 33487 |
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| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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**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 608, Florida Statutes.

SIGNATURE:

Peter Tsialiamanis

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

4-6-06

DATE

Daytime Phone #