## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Mar 01, 2006 8:00 am Secretary of State

DOCUMENT # L04000049026  1. Entity Name BRISTOL NMB, LLC							03-01-2006 90	)221 025 ****55.	00	
Principal Place 12995 N.W. MIAMI, FL 33	2ND STREE		Mailing Address 12995 N.W. 2ND STREET MIAMI, FL 33182							
2. Principal P	lace of Busin	ness	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02152006	Chg-LLC	CR2E083 (11/05)		
City & State			City & State			4. FEI Numb		1—-i—	plied For t Applicable	
Zip	•	Country	Zip	Coun	try	5. Certificate	e of Status Desired	\$5.00 Add Fee Required		
	6. Name	and Address of Current	Name				7. Name and Address of New Registered Agent			
301 WEST	HAĞLAN	FERRERO-CARR DALE BEACH BLVD CH, FL 33009	Street Addre		Street Address	ENCWAIL, NADEL & FERRERO - CARR, LLP (P.O. Box Number is Not Acceptable)				
		A	301 W. ,			HALLANDALE BEACH BLVD  LUDALE BEACH FL 33009				
8. The above named parity submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of fegistered agent.										
SIGNATURE Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)  DATE										
Fi D	iling Fee ue by Ma	is \$50.00 y 1, 2006				1	check payable to Department of State	,		
9.	·	MANAGING MEMBE	L RS/MANAGERS	10.			ADDITIONS/	CHANGES	····	
TITLE	MGRM Delete		IIIL	E			Change	☐ Addition		
NAME STREET ADDRESS	1	EZ, LUCRECIA W 2ND ST	NAMI STRE		EET ADDRESS					
CITY-ST-ZIP	MIAMI, F				-ST-ZIP					
TITLE	MGRM		☐ Delete TITL		E			☐ Change	☐ Addition	
NAME	1	EZ, RAUL	NAM		-					
STREET ADDRESS CITY-ST-ZIP	12995 NV   MIAMI, F	W 2ND ST L 33182			EET ADDRESS '+ST-ZIP					
TITLE			☐ Delete	☐ Delete TITLE				☐ Change	Addition	
NAME			KAM		-					
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CITY-ST-ZIP	hereby certify that the information supplied with this filing does not qualify for the exendicated on this report is true and accurate and that my signature shall have the same				Y-ST-ZIP	od in Chanter 11	9 Florida Statutes 16:	rther certify that the info	rmation	
indicated	on this repo	ort is true and accurate and	I that my signature shall have e empowered to execute this	the sam	e legal effect as it is required by Cha	f made under oa apter 608. Florida	th; that I am a manag a Statutes.	ing member or manage	or of the	
SIGNATURE: Al Alle Company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.										
SIGNAT	NRF.	KARDAUA		ハハ		(	52/21/06	(305/061-	<i>उळ</i> ऽ	