


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L04000050890 1. Entity Name SMALL ACRES, LLC	
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Principal Place of Business 24100 SW 122 AVE MIAMI, FL 33032	Mailing Address 116 COCO PLUM ROAD S. KEY LARGO, FL 33037
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01232008 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1354322	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent LUPINO, JAMES S ESQ. 90130 OLD HIGHWAY TAVERNIER, FL 33070
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	<small>(NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2006**

00000078452
04/08/06-80006-012 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, JOY C 116 COCO PLUM ROAD S. KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OUDIN, ANN LOUISE 10620 SW 111 STREET MIAMI, FL 33176
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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: 	3/17/06 <small>Date</small>	305-394-7866 <small>Daytime Phone #</small>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		