

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 14, 2006 8:00 am**  
**Secretary of State**

03-14-2006 90203 041 \*\*\*\*55.00

<b>DOCUMENT # L04000052283</b>					
<b>1. Entity Name</b> UNISHARE, LLC					
<b>Principal Place of Business</b> PO BOX 640864 MIAMI, FL 33164 US			<b>Mailing Address</b> PO BOX 640864 MIAMI, FL 33164 US		
<b>2. Principal Place of Business</b> 1297 NW 100 TERR.			<b>3. Mailing Address</b> 1297 NW 100 TERR.		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
<b>City &amp; State</b> MIAMI, FLORIDA			<b>City &amp; State</b> MIAMI, FLORIDA		
<b>Zip</b> 33147		<b>Country</b> USA		<b>4. FEI Number</b> 20-1393593	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$5.00 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b> NUBIAN TAX CONSULTANTS 16300 NE 19 AVENUE SUITE 215 NORTH MIAMI BEACH, FL 33162			<b>7. Name and Address of New Registered Agent</b> Name: JOSEPH JEAN-JACQUES Street Address (P.O. Box Number is Not Acceptable): 1297 NW 100 TERRACE City: MIAMI FL Zip Code: 33147		
<b>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.</b>					
SIGNATURE:		JOSEPH JEAN-JACQUES		* 2/2/06	
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
<b>9. MANAGING MEMBERS / MANAGERS</b>			<b>10. ADDITIONS / CHANGES</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MELEUS, KERMANE 1510 NE 151 STREET APT. 103 MIAMI, FL 33162	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JEAN-JACQUES, JOSEPH 1297 NW 100 TERRACE MIAMI, FL 33147	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LAURENT, ARNELLE 1745 SANSSMA BLVD NORTH MIAMI, FL 33181	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DIVINE GRACE, LLC PO BOX 640864 MIAMI, FL 33164	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JOSEPH, FUCNER 3240 NW 203 LANE MIAMI, FL 33056	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
<b>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.</b>					
SIGNATURE:		JOSEPH JEAN-JACQUES MGRM		* 2/2/06 (786) 326-9955	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

20015809



02212006 Chg-LLC CR2E083 (11/05)

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name JOSEPH JEAN-JACQUES

Street Address (P.O. Box Number is Not Acceptable) 1297 NW 100 TERRACE

City MIAMI FL Zip Code 33147

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

JOSEPH JEAN-JACQUES

\* 2/2/06

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
MELEUS, KERMANE  
1510 NE 151 STREET APT. 103  
MIAMI, FL 33162

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
JEAN-JACQUES, JOSEPH  
1297 NW 100 TERRACE  
MIAMI, FL 33147

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
LAURENT, ARNELLE  
1745 SANSSMA BLVD  
NORTH MIAMI, FL 33181

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGR  
DIVINE GRACE, LLC  
PO BOX 640864  
MIAMI, FL 33164

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
JOSEPH, FUCNER  
3240 NW 203 LANE  
MIAMI, FL 33056

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

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CITY - ST - ZIP  
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JOSEPH JEAN-JACQUES

MGRM

SIGNATURE:

\* 2/2/06

(786) 326-9955

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

Date

Daytime Phone #