

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 01, 2006 8:00 am
Secretary of State

08-01-2006 90064 007 ****50.00

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07102006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1395689	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPILLER, MIRIAM/DENNIS
1883 N.W. 124TH TERRACE Avenue
CORAL SPRINGS, FL 33071

**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 September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SPILLER, DENNIS 1883 NW 124TH TERR Avenue POMPANO BEACH, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SPILLER, MIRIAM 1883 NW 124TH TERR Avenue POMPANO BEACH, FL 33071
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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:

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

Date

Daytime Phone #

7/20/06