

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000052987 1. Entity Name OLSEN INVESTMENTS II, L.L.C.	
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Principal Place of Business 2364 NW 157 VE PEMBROKE PINES, FL 33028	Mailing Address 2364 NW 157 VE PEMBROKE PINES, FL 33028
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DO NOT WRITE IN THIS SPACE



04122006 No Chg-LLC

CR2E093 (11/05)

4. FEI Number 20-1560845	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FERNANDO J. PORTUONDO, P.A. 2121 PONCE DE LEON BLVD., STE. 600 CORAL GABLES, FL 33134

**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 retreating)	DATE _____
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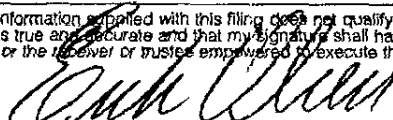
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OLSEN, ERIK 2364 NW 157 AVE PEMBROKE PINES, FL 33028
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OLSEN, MELISSA 2364 NW 157 AVE PEMBROKE PINES, FL 33028
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05/01/06-80048-003 55.00

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: 	4-12-06 (954) 801-5097
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #