

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056065

Entity Name: AGNES ULRICA LAMANQUE, LLC

FILED  
Jun 21, 2005  
Secretary of State

**Current Principal Place of Business:**

4975 N.W. 10TH STREET  
COCONUT CREEK, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

4975 N.W. 10TH STREET  
COCONUT CREEK, FL 33063

**New Mailing Address:**

FEI Number: 20-1430812      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410      US

**Name and Address of New Registered Agent:**

LAMANQUE, AGNES  
4975 NW 10TH STREET  
COCONUT CREEK, FL 33063      US

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.

SIGNATURE: AGNES LAMANQUE

06/21/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: LAMANQUE, AGNES ULRICA  
Address: 1435 SE 15TH STREET #202  
City-St-Zip: FT LAUDERDALE, FL 33316

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: LAMANQUE, AGNES  
Address: 4975 NW 10TH STREET  
City-St-Zip: COCONUT CREEK, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: AGNES LAMANQUE

MGR

06/21/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date