

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059438

FILED
Jan 16, 2006
Secretary of State

Entity Name: ROBELO-KELLY HOLDINGS, L.L.C.

Current Principal Place of Business:

5835 BLUE LAGOON DR.
SUITE 300
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5835 BLUE LAGOON DR.
SUITE 300
MIAMI, FL 33126

New Mailing Address:

FEI Number: 55-0891268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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:

ROBELO, EDUARDO E
704 ZAMORA AVE.
CORAL GABLES, FL 33134 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: EDUARDO E. ROBELO

01/16/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROBELO, ARNOLDO M
Address: 5835 BLUE LAGOON DR. SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: VALENCIA, AGNES
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: ARGUELLO, IVONNE
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: ROBELO, EDUARDO E
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: ROBELO, ARNOLDO R
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: ROBELO, MICHAEL A
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: ROBELO, AGNES M
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: MGR (X) Change () Addition
Name: ARGUELLO, IVONNE R
Address: 5835 BLUE LAGOON DRIVE SUITE 300
City-St-Zip: MIAMI, FL 33126

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 M. ROBELO

MGR

01/16/2006

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