

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

05-01-2006 90085 019 ****75.00

DOCUMENT # L04000061549

1. Entity Name
RENZO VERITA INSURANCE CONSULTANTS LLC



Principal Place of Business
**260 CRANDON BOULEVARD, SUITE #3
KEY BISCAVNE, FL 33149**

Mailing Address
**260 CRANDON BOULEVARD, SUITE #3
KEY BISCAVNE, FL 33149**

20041755



04242006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE 20-3239775

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS, INC.
260 SOUTH BISCAVNE BOULEVARD, 43RD FLOOR
MIAMI, FL 33131
TERRANCE J. MULLIN, P.A.
150 SE 2nd Ave., #1201
MIAMI FL 33131

**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

TERRANCE J. MULLIN, Pres.

(NOTE: Registered Agent signature required when reinstating)

4/25/06

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
VERITA, RENZO
260 CRANDON BOULEVARD, SUITE #3
KEY BISCAVNE, FL 33149**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Renzo Verita

4/25/06

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

Date

Daytime Phone #