# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 12, 2006 8:00 am**
**Secretary of State**

04-12-2006 90018 035 ****50.00

DOCUMENT # L04000067015

1. Entity Name
ROBAX, LLC

Principal Place of Business
3949 E. HIBISCUS ST.
WESTON, FL 33332

Mailing Address
3949 E. HIBISCUS ST.
WESTON, FL 33332

600260400

02272006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business
11406 Canyon Maple Blvd
Suite, Apt. #, etc.

3. Mailing Address
11406 Canyon Maple Blvd
Suite, Apt. #, etc.

City & State: Davie, FL
Zip: 33330 Country:

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Zip: 33330 Country:

4. FEI Number: 55-0880689 — Applied For / Not Applicable

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

**6. Name and Address of Current Registered Agent**

CHERIAN, SAMUEL
3949 E. HIBISCUS ST.
WESTON, FL 33332

**7. Name and Address of New Registered Agent**

Name: Cherian Samuel
Street Address (P.O. Box Number is Not Acceptable): 11406 Canyon Maple Blvd
City: Davie FL Zip Code: 33330

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 May 1, 2006**

**Make check payable to Florida Department of State**

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|---|---|---|---|
| TITLE | MGR ☐ Delete | TITLE | MGR ☒ Change ☐ Addition |
| NAME | CHERIAN, SAMUEL | NAME | Cherian Samuel |
| STREET ADDRESS | 3949 E. HIBISCUS ST. | STREET ADDRESS | 11406 Canyon Maple Blvd |
| CITY-ST-ZIP | WESTON, FL 33332 | CITY-ST-ZIP | Davie, FL 33330 |
| TITLE | MGR ☐ Delete | TITLE | MGR ☒ Change ☐ Addition |
| NAME | SAMUEL, SHIRLEY | NAME | Shirley Samuel |
| STREET ADDRESS | 3949 E. HIBISCUS ST. | STREET ADDRESS | 11406 Canyon Maple Blvd |
| CITY-ST-ZIP | WESTON, FL 33332 | CITY-ST-ZIP | Davie, FL 33330 |
| TITLE | MGRM ☐ Delete | TITLE | MGRM ☒ Change ☐ Addition |
| NAME | TORADOL LIMITED PARTNERSHIP | NAME | Toradol Limited Partnership |
| STREET ADDRESS | 3949 E. HIBISCUS ST. | STREET ADDRESS | 11406 Canyon Maple Blvd |
| CITY-ST-ZIP | WESTON, FL 33332 | CITY-ST-ZIP | Davie, FL 33330 |
| TITLE | ☐ Delete | TITLE | ☐ Change ☐ Addition |
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| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

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: _____ 4/08/2006 9544724257
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #