

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

05-01-2006 90060 038 ****50.00

DOCUMENT # L04000069390
 1. Entity Name
 ALLIANCE INVESTMENTS, L.L.C.



Principal Place of Business Mailing Address
 2939 ELYSIUM WAY 2939 ELYSIUM WAY
 CLEARWATER, FL 33759 CLEARWATER, FL 33759

DO NOT WRITE IN THIS SPACE



04212006 No Chg-LLC CR2E083 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 20-1714818 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent
 GOLD, AARON J
 704 WEST BAY STREET
 TAMPA, FL 33606

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

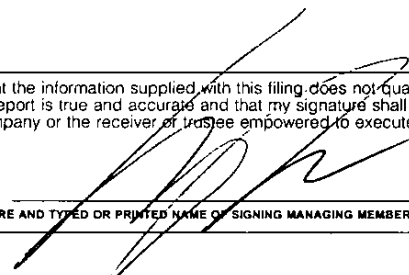
**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

| | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM CAMLAS, NICHOLAS A 2939 ELYSIUM WAY CLEARWATER, FL 33759 |
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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:  *Nicholas A. Camlas* 727 468 8275
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

