

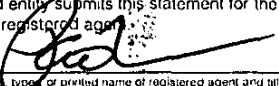
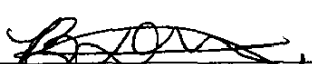


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90027 010 ****50.00

DOCUMENT # L04000069472					
1. Entity Name DUENAS INVESTMENT GROUP LLC					
Principal Place of Business 13402 SW 43RD LANE MIAMI, FL 33176			Mailing Address 13402 SW 43RD LANE MIAMI, FL 33176		
2. Principal Place of Business 5750 SW 120 AVE Suite, Apt. #, etc.		3. Mailing Address 5750 SW 120 AVE Suite, Apt. #, etc.			
City & State MIAMI, FL Zip 33183		City & State MIAMI, FL Zip 33183		4. FEI Number 20-1951022	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent COWAN, PAUL M 900 S.W. 2ND AVENUE MIAMI, FL 33130			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 17345 SOUTH DIXIE HIGHWAY City MIAMI FL Zip Code 33157		
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 			DATE 2/14/06		
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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUENAS, BARBARA 13402 SW 43RD LANE MIAMI, FL 33176	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5750 SW 120 AVE MIAMI, FL 33183	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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: 			DATE 3/8/06 (305) 525-1208		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

**HIRSH
AND
COMPANY**

ATTACHMENT

20016841
L04000069472

CERTIFIED PUBLIC ACCOUNTANTS

7990 SW 117 Avenue, Suite 203
Miami, Florida 33183

Dade (305) 595-7100
Broward (954) 462-1740
Fax (305) 598-5100

March 13, 2006

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

**PLEASE SIGN, DATE AND RETURN THIS COPY
TO HIRSH AND COMPANY, CPA's.**

Dear Sirs:

Enclosed is Florida 2006 Limited Liability Company Annual Report, and check, for the following taxpayer:

<u>Name</u>	<u>Year</u>	<u>FEL #</u>	<u>Check</u>
Duenas Investment Group, LLC	2006	20-1951022	\$ 50.00

Kindly acknowledge receipt of the above 2006 Uniform Business Report and check, by signing and dating the enclosed copy of this letter and returning it to us in the envelope provided.

Very truly yours,



Michael Singer, CPA

H&CO Form 3053ubrc.k.llc
Enclosures

Received by

Title

Date

**HIRSH
AND
COMPANY**

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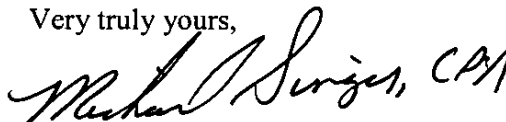
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