## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000069950

Name:

Address:

City-St-Zip:

JAVIER, MARTINEZ

MIAMI BEACH, FL 33141

6820 INDIAN CREEK DRIVE #306

Entity Name: OBGM ENTERPRISES, LLC

FILED Apr 25, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 940 LINCOLN ROAD 201 MIAMI BEACH, FL 33139 **New Mailing Address: Current Mailing Address:** 940 LINCOLN ROAD MIAMI BEACH, FL 33139 FEI Number: 20-1781477 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JAVIER, MARTINEZ JUAN, BENNAZAR 940 LINCOLN ROAD 940 LÍNCOLN ROAD 201 201 MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 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: JUAN BENNAZAR 04/25/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete MARIA, ORTEGA L Name: Name: PO BOX 338027 Address: Address: City-St-Zip: COCONUT GROOVE, FL 33132 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: CHAD, GLAUSER H Name: Address: 110 WASHINGTON AVE #1605 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: Title: MGR () Delete Title: () Change () Addition JUAN, BENNAZAR A Name: Name: PARKVILLE SUR, HAMILTON C-20 Address: Address: City-St-Zip: GUAYNABO, PR 00969 City-St-Zip: Title: MGR () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JUAN BENNAZAR MGR 04/25/2006