

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90151 036 ****50.00

DOCUMENT # L04000075879

1. Entity Name
CASH FLO II, LLC



Principal Place of Business
**729 RED ARROW TRAIL
PALM DESERT, CA 92211**

Mailing Address
**729 RED ARROW TRAIL
PALM DESERT, CA 92211**

DO NOT WRITE IN THIS SPACE



01142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LYNN, MARK J ESQ.
2101 WEST COMMERCIAL BLVD., SUITE 4100
FT. LAUDERDALE, FL 33309**

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
THE R.D. AND A.L. ASHER TRUST DATED 6/1/89
729 RED ARROW TRAIL
PALM DESERT, CA 92211**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
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: _____

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

RONALD ASHER

Date

Daytime Phone #

1-23-06 (740) 360-7705

ATTACHMENT
20003539
#L04000075879

PETER M. FUKUMAE
Certified Public Accountant
1280 Civic Drive, Suite 108
Walnut Creek, CA 94596

January 17, 2006

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

Gentlemen:


Enclosed is the 2006 Limited Liability Company Annual Report for:

Cash Flo II, LLC
L04000075879

Along with a check for \$50.

Please acknowledge the receipt of this return in the space below and return this letter to us.

Very truly yours,


Peter M. Fukumae

DIVISION OF CORPORATIONS

BY _____

DATE _____