## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **DOCUMENT # L04000076025**

1. Entity Name

JONAL HOLDINGS LLC

Principal Place of Business

2875 N.E. 191 STREET, PENTHOUSE 1 AVENTURA, FL 33180 Mailing Address

2875 N.E. 191 STREET, PENTHOUSE 1 AVENTURA, FL 33180

### FILED Mar 02, 2006 8:00 am Secretary of State

03-02-2006 90138 014 \*\*\*\*55.00



DO NOT WRITE IN THIS SPACE	CE
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01262006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 26-0098990

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KLEIN, THEODORE J ESQ. 8030 PETERS ROAD, BLDG. D, SUITE 104 PLANTATION, FL 33324

# 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.

9.

Signature, typed or printed name of registered agent and title if applicable.

MANAGING MEMBERS/MANAGERS

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE - NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR- AZOUT, JACK 2875 N.E. 191 STREET, PENTHOUSE 1 AVENTURA, FL 33180 MGR SREDNI, ERWIN 2875 N.E. 191 STREET, PENTHOUSE 1 AVENTURA, FL 33180	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVERTURA, TE 30100	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling does not qualify for the		

## 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 PROFITED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/27/06

305 935-5775

Daytime Phone #