


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 06, 2006 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # L04000082402 1. Entity Name CARICARI HOLDINGS, LLC |  |
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| Principal Place of Business 22715 CAMINO DEL MAR #56 BOCA RATON, FL 33433 | Mailing Address 22715 CAMINO DEL MAR #56 BOCA RATON, FL 33433 |
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02242006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 20-2291501 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 8. Name and Address of Current Registered Agent CARRILLO, ANTONIO J 22715 CAMINO DEL MAR #56 BOCA RATON, FL 33433 |
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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 | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CARRILLO, ANTONIO J 22715 CAMINO DEL MAR #56 BOCA RATON, FL 33433 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CARRILLO, ANTONIO F 22715 CAMINO DEL MAR #56 BOCA RATON, FL 33433 |
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| <p>U00000457845 03/17/06-80020-022 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p> |
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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.

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|---|-------------------------------------|
| SIGNATURE:  | 6/26/2006 3620868 |
| <small>SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> | <small>Date Daytime Phone #</small> |