


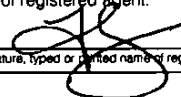

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90036 050 ****50.00

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DOCUMENT # L04000093286			
1. Entity Name HORKEY HOLDINGS, LLC			
Principal Place of Business 8211 W BROWARD BLVD, STE PH1 5TH FL BROWARD, FL 33324		Mailing Address 8211 W BROWARD BLVD, STE PH1 5TH FL BROWARD, FL 33324	
2. Principal Place of Business 1770 W Oakland Park Blvd		3. Mailing Address same	
Suite/Apt. #, etc. 470		Suite, Apt. #, etc.	
City & State Sunrise FL		City & State	
Zip 33351	Country USA	Zip	Country
6. Name and Address of Current Registered Agent HORKEY, FRANK J 8211 WEST BROWARD BOULEVARD STE PH1 FIFTH FL BROWARD, FL 33324		7. Name and Address of New Registered Agent Name Horkey, Frank J Street Address (P.O. Box Number is Not Acceptable) 1770 W Oakland Park Blvd Suite 470 City Sunrise FL Zip Code 33351	
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 		FRANK J HORKEY 4/7/06 DATE	
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	P HORKEY, FRANK 10340 SW 16TH PLACE DAVIE, FL 33324 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HORKEY, DONNA 10340 SW 16TH PLACE DAVIE, FL 33324 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<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: 		FRANK J HORKEY 4/7/06 954-742-3001 Date Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			