


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 20, 2006 8:00 am**  
**Secretary of State**

01-20-2006 90049 005 \*\*\*\*50.00

DOCUMENT # L04000093813	
1. Entity Name BV CAPITAL, LLC	

Principal Place of Business 2 FIRESTONE CIRCLE WEST PALM BEACH, FL 33401 US	Mailing Address 2 FIRESTONE CIRCLE WEST PALM BEACH, FL 33401 US
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**DO NOT WRITE IN THIS SPACE**



01062006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2188759	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

VILLARI, FRED  
 2 FIRESTONE CIRCLE  
 WEST PALM BEACH, FL 33401

**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 \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VILLARI, FRED 2 FIRESTONE CIRCLE WEST PALM BEACH, FL 33401
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**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: *Fred Villari, President* Date: 1-18-06 Daytime Phone #: 581-248-8786

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