

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000623

Entity Name: VAZ HOLDINGS, LLC

FILED
May 02, 2006
Secretary of State

Current Principal Place of Business:

P. O. BOX 266906
WESTON, FL 33326 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 266906
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 20-2101214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

VAZ, MAURICE
15215 SW 51 STREET
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VAZ, MAURICE
Address: P. O. BOX 266906
City-St-Zip: WESTON, FL 33326 US

Title: MGR () Delete
Name: VAZ, MAURICE
Address: P. O. BOX 266906
City-St-Zip: WESTON, FL 33326 US

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: VAZ, MAURICE
Address: P. O. BOX 266906
City-St-Zip: WESTON, FL 33326 US

Title: MGR (X) Change () Addition
Name: VAZ, ALINDA
Address: P. O. BOX 266906
City-St-Zip: WESTON, FL 33326 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MAURICE VAZ

PD

05/02/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date