2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 25, 2006
Secretary of State

DOCUMENT# L05000000904

Entity Name: BRAZEN INVESTMENTS, LLC

Current Principal Place of Business:

C/O IRVING BRAZEN
10944 BOCA WOODS LANE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

C/O IRVING BRAZEN
10944 BOCA WOODS LANE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 20-2125234 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BSPA CORPORATE SERVICES, INC.
350 EAST LAS OLAS BLVD., SUITE 1000
FORT LAUDERDALE, FL 33301 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:	MGRM	( ) Delete
Name:	BRAZEN, IRVING	
Address:	10944 BOCA WOODS LANE	
City-St-Zip:	BOCA RATON, FL 33428	
Title:	MGRM	( ) Delete
Name:	JATLOW, KAREN	
Address:	10808 KIRKWALL TERRACE	
City-St-Zip:	POTOMAC, MD 20854	
Title:	MGRM	( ) Delete
Name:	TANEY, AMY	
Address:	7066 AYRSHIRE LANE	
City-St-Zip:	BOCA RATON, FL 33496	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: AMY TANEY MGRM 03/25/2006

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