2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 05, 2006
Secretary of State

DOCUMENT# L05000002384

Entity Name: CSI INVESTMENT LLC

Current Principal Place of Business:

15751 SHERIDAN STREET
#205
FT LAUDERDALE, FL 33331

New Principal Place of Business:

Current Mailing Address:

15751 SHERIDAN STREET
#205
FT LAUDERDALE, FL 33331

New Mailing Address:

FEI Number: 20-2121344 **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:

STEPHANIE, HOLMES
813 CRESTVIEW LANE
WESTON, FL 33027 US

Name and Address of New Registered Agent:

STEPHANIE, HOLMES
3233 LAKE RIDGE LANE
WESTON, FL 33332 US

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: STEPHANIE J HOLMES 09/05/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LAING, CAROLYN
Address: 15751 SHERIDAN STREET, # 205
City-St-Zip: FT LAUDERDALE, FL 33331

Title: MGR ( ) Delete
Name: HOLMES, STEPHANE
Address: 813 CRESTVIEW LANE
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: HOLMES, STEPHANE
Address: 3233 LAKE RIDGE LANE
City-St-Zip: WESTON, FL 33332

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: STEPHANIE J HOLMES MGR 09/05/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date