

FILED
May 04, 2006 8:00 am
Secretary of State

03-23-2006 90262 022 ****50.00

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000006844			
1. Entity Name KARATERE 2, LLC			
Principal Place of Business 3358 WOODS EDGE CIRCLE SUITE 102 BONITA SPRINGS, FL 34134		Mailing Address 3358 WOODS EDGE CIRCLE SUITE 102 BONITA SPRINGS, FL 34134	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 35-2253356		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		03112006 Chg-LLC CR2E083 (11/05)	
6. Name and Address of Current Registered Agent KARAKOSTA, CHRIS J 3358 WOODS EDGE CIRCLE SUITE 102 BONITA SPRINGS, FL 34134		7. Name and Address of New Registered Agent Name ROMEO TEREZI Street Address (P.O. Box Number is Not Acceptable) 2135 IMPERIAL CIRCLE City NAPLES, FL Zip Code 34110	
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 <u>Romeo Terezi</u> DATE <u>03/14/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)			
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 MGR KARAKOSTA, CHRIS J 3358 WOODS EDGE CIRCLE, SUITE 102 BONITA SPRINGS, FL 34134 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP MGR FOUNDOS, ALBERT 820 BENTWATER CIRCLE UNIT 202 NAPLES, FL 34108 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP MEMBER, Managing TEREZI, ROMEO 2135 IMPERIAL CIRCLE NAPLES, FL 34110 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP MEMBER, Managing TEREZI, KOSTA 2113 MISSION DRIVE NAPLES, FL 34109 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition		
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: <u>Romeo Terezi</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE <u>03/14/06</u> 239450-3088 Daytime Phone #	