2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007033

Address:

City-St-Zip:

17663 S.W. 5 STREET

PEMBROKE PINES, FL 33029

Entity Name: EL TAMARINDO CAFE & RESTAURANT LLC

FILED Feb 28, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	V. 5 STREET KE PINES, FL 33029				
Current Mailing Address:			New Mailing Address:		
	V. 5 STREET KE PINES, FL 33029				
FEI Number	: 20-4393867 FEI N	lumber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
AMAYA, N 17663 S.W PEMBROM	IESTOR V. 5 STREET KE PINES, FL 33029	US			
	e named entity submits e of Florida.	s this statement for the p	ourpose of changing its register	ed office or registered agent, or both	
SIGNATU	RE:				
	Electronic Sigr	nature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete AMAYA, RAFAEL 17663 S.W. 5 STREET PEMBROKE PINES, FL	33029	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete AMAYA, SONIA 17663 S.W. 5 STREET PEMBROKE PINES, FL	33029	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete AMAYA, JUAN C 17663 S.W. 5 STREET PEMBROKE PINES, FL	33029	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete AMAYA, YEXON O 17663 S.W. 5 STREET PEMBROKE PINES, FL	33029	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete AMAYA, NESTOR		Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: RAFAEL AMAYA MGMR 02/28/2006