2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# L05000007323

Entity Name: ECL REAL ESTATE GROUP, LLC

Current Principal Place of Business:

20535 NW 2ND AVE
204
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

20535 NW 2ND AVE
204
MIAMI, FL 33169

New Mailing Address:

FEI Number: 26-0107757 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ETIENNE, HERMANE
425 NE 140TH STREET
NORTH MIAMI
MIAMI,, FL 33161 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: ETIENNE, HERMANE
Address: 425 NE 140TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: MGR ( ) Delete
Name: LINDOR, JEAN
Address: 884 NE 160TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGR ( ) Delete
Name: JEAN-MICHEL, CERENORD
Address: 5934 NW 2ND AVE
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ETIENNE, HERMANE
Address: 2153 RENAISSANCE BLVD, 305
City-St-Zip: MIRAMAR, FL 33025

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: HERMANE ETIENNE MGR 04/28/2006

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