

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008357

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: LA IGUALADINA LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

11281 INTERCHANGE CIRCLE SOUTH  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

11281 INTERCHANGE CIRCLE SOUTH  
MIRAMAR, FL 33025

**New Mailing Address:**

FEI Number: 20-2269735

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AUDE, AMED  
11281 INTERCHANGE CIRCLE SOUTH  
MIRAMAR, FL 33025 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: P ( ) Delete  
Name: AUDE, AMED  
Address: 11281 INTERCHANGE CIRCLE SOUTH  
City-St-Zip: MIRAMAR, FL 33025

Title: VP ( ) Delete  
Name: GARCIA, TOMAS  
Address: 11281 INTERCHANGE CIRCLE SOUTH  
City-St-Zip: MIRAMAR, FL 33025

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

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

Title: T ( ) Change (X) Addition  
Name: LOPEZ, SAID  
Address: 11281 INTERCHANGE CIRCLE SOUTH  
City-St-Zip: MIRAMAR, FL 33025

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: AMED AUDE

P

03/08/2006

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