

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000021856

FILED
Apr 21, 2006
Secretary of State**Entity Name:** CITYCONCEPTS, L.L.C.**Current Principal Place of Business:**2875 NE 191ST ST.
901A
AVENTURA, FL 33180**New Principal Place of Business:****Current Mailing Address:**2875 NE 191ST ST.
901A
AVENTURA, FL 33180**New Mailing Address:****FEI Number:** 20-2500961**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMULEVICH, PABLO
2875 NE 191ST ST.
901A
AVENTURA, FL 33180 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:** MGRM () Delete
Name: SMULEVICH, PABLO D
Address: 2875 NE 191ST ST. SUITE 901
City-St-Zip: AVENTURA, FL 33180**Title:** MGRM () Delete
Name: BEBCHIK, LUIS
Address: 2875 NE 191ST ST. SUITE 901
City-St-Zip: AVENTURA, FL 33180**Title:** MGRM () Delete
Name: MICULITZKI, GUSTAVO
Address: 2875 NE 191ST ST. SUITE 901
City-St-Zip: AVENTURA, FL 33180**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: SMULEVICH, PABLO D
Address: 2875 NE 191ST ST. SUITE 901A
City-St-Zip: AVENTURA, FL 33180**Title:** MGRM (X) Change () Addition
Name: BEBCHIK, LUIS
Address: 2875 NE 191ST ST. SUITE 901A
City-St-Zip: AVENTURA, FL 33180**Title:** MGRM (X) Change () Addition
Name: MICULITZKI, GUSTAVO
Address: 2875 NE 191ST ST. SUITE 901A
City-St-Zip: AVENTURA, FL 33180

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: PABLO SMULEVICH

MGRM

04/21/2006

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