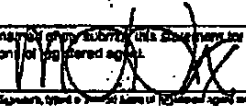
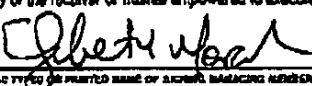


Apr. 21. 2006 10:44AM FOX WACKEEN DUNGEY ET AL

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR)**

FILED
May 12, 2006 8:00 am
Secretary of State

04-12-2006 90022 022 ****50.00

DOCUMENT # L06000021991			
1. Entity Name SENE INVESTMENTS LLC			
Principal Place of Business 12609 52ND ROAD NO. ROYAL PALM BEACH FL 33411		Mailing Address 12609 52ND ROAD NO. ROYAL PALM BEACH FL 33411	
2. Principal Place of Business		3. Mailing Address	
Succ. Apt. #, etc.		Succ. Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-2518688		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HAMILTON, EVELYN 5700 LAKE WORTH RD. #311-5 GREENACRES BEACH FL 33483		7. Name and Address of New Registered Agent Name Fox, M Lanning Street Address (P.O. Box Number is Not Acceptable) 1100 South Federal Highway Stuart City Stuart FL 34994	
8. The above named entity submits this document 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 obligation of registered agent.			
SIGNATURE  MLANNING FOX		Date 3/31/06	
FILE NOW!!! FEE \$650.00 Make Check Payable to Florida Department of State Due By May 1, 2006			
9. MANAGING MEMBERS/MANAGERS			
10. ADDITIONS/CHANGES			
TITLE Single Member ☐ Delete NAME John S. Morales President STREET ADDRESS 12609 52nd Road CITY-STATE-ZIP N. Royal Palm Beach, FL 33411		TITLE ☐ Change ☐ Add NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME Elizabeth R. Morales V. President STREET ADDRESS 12609 52nd Road CITY-STATE-ZIP N. Royal Palm Beach, FL 33411		TITLE ☐ Change ☐ Add NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Add NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Add NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Add NAME STREET ADDRESS CITY-STATE-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 118, 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 605, Florida Statutes.			
SIGNATURE: 		Date 4/03/06 5612620810	