
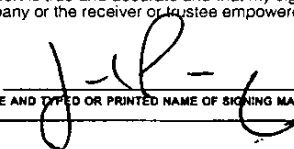


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90186 003 ****50.00

DOCUMENT # L05000023429 1. Entity Name JOEY'S BEAVER CREEK, LLC			
Principal Place of Business 1150 NORTHWEST 72ND AVENUE SUITE 620 MIAMI, FL 33126		Mailing Address 1150 NORTHWEST 72ND AVENUE SUITE 620 MIAMI, FL 33126	
2. Principal Place of Business 61 Avondale Lane Suite, Apt. #, etc. Unit 104		3. Mailing Address 2665 Hackney Rd. Suite, Apt. #, etc.	
City & State Avon, Colorado		City & State Weston, FL	
Zip 81620	Country US	Zip 33331	Country US
4. FEI Number 20-2454989		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent PEREZ, JOSEPH H 1150 NORTHWEST 72ND AVENUE SUITE 620 MIAMI, FL 33126		7. Name and Address of New Registered Agent Name Perez, Joseph H. Street Address (P.O. Box Number is Not Acceptable) 2665 Hackney Rd. City Weston FL Zip Code 33331	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEREZ, JOSEPH H 1150 NORTHWEST 72ND AVENUE, SUITE 620 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2665-Hackney Rd. Weston, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PEREZ, HEINRICH J 1150 NORTHWEST 72ND AVENUE, SUITE 620 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2665 Hackney Rd. Weston, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PEREZ, NICOLE J 1150 NORTHWEST 72ND AVENUE, SUITE 620 MIAMI, FL 33126 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2665 Hackney Rd. Weston, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 608, Florida Statutes.			
SIGNATURE: 		2/10/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	