2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 27, 2006 8:00 am Secretary of State 02-10-2006 90170 001 ****50.00

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Suite, Apt. 4, etc. Suite, Apt. 2, etc. O1002008 Chg-LLC CR2E083 (11/05)	4101 VINKEN	WULDER RO	AD	4101 VINKEMULDER I	4101 VINKEMULDER ROAD							
City & State Country Country Country Country Country Country S. Cartificate of Status Opered S\$5.00 And New York Country S. Cartificate of Status Opered S\$5.00 And New York Country Registered Agent 7. Name and Address of New Registered Agent Name ELSTER, LARRY D 4101 VINKEMUL DER ROAD COCONUT CREEK, FL 33073 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the obligations of registered agent, or both, in the State of Portice. I can furnisher with, or the ob	2. Principal Pl	lace of Busin	ness	3. Mailing Address								
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ELSTER, LARRY D 4101 VINKEMULDER ROAD COCONUT CREEK, FL 33073 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an one obligations of registered agent, or both, in the State of Florids. I am familiar with, an familiar with,	Zip		Country	Zip Count		itry	5. Certificat	e of Status Desired				
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B. The above named entity submits this statement for the purpose of changing its registared office or registared agent, or both, in the State of Florida. I am familiar with, an the obligations of registared agent. SIGNATURE Registant, food or private review of registered agent and the Floridate. Filling Foo is \$50.00 Due by May 1, 2006 Filling Foo is \$50.00 Make check payable to Florida Department of State 9. MANAGING MEMBERS / MANAGERS TIME MARE COMPLETE PROPERTY MAINTENANCE, INC. STREET ADDRESS CITY-ST-20 TIME MARE STREET ADDRESS CITY-ST-20 TIME STREET ADDRESS CITY-ST-20 TI	4101 VINK	EMULDE				Street Address (P.O. Box Number is Not Acceptable)						
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Bue by May 1, 2006 Post	SIGNATURE Signature, typed or printed release of registered agent and title if applicable. (NOTE: Registered Agent algregate required when rematating) DATE											
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11. Liberaby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutas. I further certify that the inform indicated on this report is true and acculate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of limited liability company before receiver or frustse employeered to execute this report as required by Chapter 808, Florida Statutes. SIGNATURE:												



February 14, 2006

4101 VINKEMULDER ROAD LLC 4101 VINKEMULDER ROAD COCONUT CREEK, FL 33073-6

Subject: 4101 VINKEMULDER ROAD LLC

Reference Number:

L05000026816

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CJ ANNUAL REPORTS SECTION