

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038205

FILED  
Aug 15, 2006  
Secretary of State

Entity Name: YES I LLC

## Current Principal Place of Business:

749 CRANDON BLVD.  
APT. 511  
KEY BISCAYNE, FL 33149 US

## New Principal Place of Business:

350 WEST ENID DRIVE  
KEY BISCAYNE, FL 33149 US

## Current Mailing Address:

749 CRANDON BLVD.  
APT. 511  
KEY BISCAYNE, FL 33149 US

## New Mailing Address:

350 WEST ENID DRIVE  
KEY BISCAYNE, FL 33149 US

FEI Number: 51-0544086      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

BOCCARDI, ANDREA  
749 CRANDON BLVD.  
APT. 511  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

BOCCARDI, ANDREA  
350 WEST ENID DRIVE  
KEY BISCAYNE, FL 33149 US

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:

08/15/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BOCCARDI, ANDREA  
Address: 749 CRANDON BLVD., APT. 511  
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGRM ( ) Delete  
Name: ALVEAR, PAOLA  
Address: 749 CRANDON BLVD., APT. 511  
City-St-Zip: KEY BISCAYNE, FL 33149 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BOCCARDI, ANDREA  
Address: 350 WEST ENID DRIVE  
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGRM (X) Change ( ) Addition  
Name: PERIN, ARRIGO  
Address: P.TTA GUASTALLA 5  
City-St-Zip: MILAN, IT 20122 IT

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: BOCCARDI ANDREA

MGRM

08/15/2006

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