## **2006 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT**



**DOCUMENT # L05000038840** 

WINDSO	R ICM LL	.C ·									
Principal Place of Business 1414 N.W. 107 AVE. SUITE 109 MIAMI, FL 33172			Mailing Address 1414 N.W. 107 AVE. SUITE 109 MIAMI, FL 33172				60035232				
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04122006	Chg-LLC	CF	R2E083 (11/05	5)
City & State			City & State				4. FEI Numb	765311		<del></del>	Applied For Not Applicable
Zip		Country	Zip	Coun	try		5. Certificate	of Status Desire	ed 🗔	<b>\$5.00</b> A Fee Requi	
6. Name and Address of Current			egistered Agent		7. Name and Address of New Registered Agent						
====					Name						
FERNANDEZ-VALLE, MARIA 10570 N.W. 27TH STREET, UNIT 103 MIAMI, FL 33172					Street Address (P.O. Box Number is Not Acceptable)						
,					City					<b>□</b> Zip Ci	oda.
										FL	
	named entiti ions of regist		the purpose of changing its	register	ed office or	registere	d agent, or bo	th, in the State o	of Florida.	I am familiar wil	h, and accept
SIGNATURE .	Signature, typed	or printed name of registered agent an	nd title if applicable. (NOTE	: Registere	d Agent signati	ure required v	rhen reinstating)			DATE	
Filing Fee is \$50.00 Due by May 1, 2006											
Fi Di	iling Fee i ue by Ma	is \$50.00 y 1, 2006								ck payable to artment of St	
Fi Do	iling Fee i ue by Ma	is \$50.00 y 1, 2006 MANAGING MEMBER	RS/MANAGERS	10.				Flo		artment of St	
D	MGRM	MANAGING MEMBER	S/MANAGERS	10. 11TL	E	MGRA	m	ADDITIO	orida Dep	artment of St	ate
9. TITLE NAME	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE	· · _	TITL NAM		1	. A A 1 7	ADDITIO	orida Dep	artment of St	ate
9.  TITLE  NAME  STREET ADDRESS	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE 1. 107 AVE. SUITE 109	· · _	TITL NAM STRI	ET ADDRESS	1414 P	UW 107 A	ADDITION ADDITION ADDITION ADDITION ADDITION ADDITION AVE, SUITE	orida Dep	artment of St	ate
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE 1. 107 AVE. SUITE 109	☐ Delete	TITU NAM STRI CITY	EET ADDRESS -ST-ZIP	1414 P	. A A 1 7	ADDITION ADDITION ADDITION ADDITION ADDITION ADDITION AVE, SUITE	orida Dep	artment of St	e Addition
9. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE 1. 107 AVE. SUITE 109	· · _	TITU NAM STRI CITY	EET ADDRESS -S1-ZIP	1414 P	UW 107 A	ADDITION ADDITION ADDITION ADDITION ADDITION ADDITION AVE, SUITE	orida Dep	artment of St	e Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE 1. 107 AVE. SUITE 109	☐ Delete	TITU NAM STRI CITY TITU NAM	EET ADDRESS -S1-ZIP E	1414 P	UW 107 A	ADDITION ADDITION ADDITION ADDITION ADDITION ADDITION AVE, SUITE	orida Dep	artment of St	e Addition
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9.  IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE 1. 107 AVE. SUITE 109	☐ Delete	TITU NAM STRI CITY TITL NAM STRI CITY	EET ADDRESS -ST-ZIP E EET ADDRESS -ST-ZIP	1414 P	UW 107 A	ADDITION ADDITION ADDITION ADDITION ADDITION ADDITION AVE, SUITE	orida Dep	artment of St	Addition
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9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE TITLE TITLE	MGRM FERNANI	MANAGING MEMBER DEZ-PLA, JORGE 1. 107 AVE. SUITE 109	☐ Delete	TITLE NAM STRIC CITY THE NAM STRIC CITY THE NAM	EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP EET ADDRESS -ST-ZIP	1414 P	UW 107 A	ADDITION ADDITION ADDITION ADDITION ADDITION ADDITION AVE, SUITE	orida Dep	artment of St	Addition
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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.

CITY-ST-ZIP

SIGNATURE: \_\_

CITY-ST-ZIP

INTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

FILED
May 03, 2006 8:00 am
Secretary of State
05-03-2006 90027 019 \*\*\*\*50.00