## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000040483

Entity Name: FRE-FUND 105, LLC

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

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## FILED Apr 30, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1001 N FEDERAL HWY 1001 N FEDERAL HWY 314 249 MIAMI, FL 33009 HALLANDALE, FL 33009 **Current Mailing Address: New Mailing Address:** 1001 N FEDERAL HWY 1001 N FEDERAL HWY 249 MIAMI, FL 33009 HALLANDALE, FL 33009 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRE-FUND, LLC FRE-FUND, LLC 1537 NE 194 STREET 1001 N FEDERAL HWY MIAMI, FL 33179 249 HALLANDALE, FL 33009 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: JUAN FRANCO P 04/30/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: MGRM () Delete (X) Change ( ) Addition FRE-FUND, LLC, FRE-FUND, LLC, Name: Name: 1537 NE 194 STREET Address: 1001 N FEDERAL HWY # 249 Address: City-St-Zip: MIAMI, FL 33179 US City-St-Zip: HALLANDALE, FL 33009 US Title: Title: MGRM ( ) Change (X) Addition ( ) Delete Name: Name: PACIFIC CABLE TELEVI, SION, INC Address: Address: 396 ALHAMBRA CIR #100 City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: MGRM ( ) Change (X) Addition LUGANO, LLC, Name: Name: Address: Address: 520 BRICKELL KEY DR, #915 City-St-Zip: City-St-Zip: MIAMI, FL 33131

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.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

MGRM

MGRM

FRANCO, JOSE J

GUAYAQUIL, EC 00000

HENRIQUES, CARLOS

GUAYAQUIL, EC 00000

( ) Change (X) Addition

( ) Change (X) Addition

URB RIO GUAYAS CLUB, P MENENDEZ GILBERT

9 DE OCTUBRE 416 Y CHILE, PISO 10

SIGNATURE: JUAN FRANCO P MGRM 04/30/2006