2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jun 08, 2006 8:00 am Secretary of State

DOOLII							- J		
DOCUMENT # L05000043784 1. Entity Name U.S. EURO-INVESTMENT TRUST, LLC						06-08-2006		009 ****5	55.00
Principal Place	e of Business	Mailing Address			1	2004716	5		
1820 NE 163RD ST. 18181 NE 31ST COURT									
SUITE 206 #2407									
NORTH MIAN	MI BEACH, FL 33162 US	AVENTURA, FL 33160	US					iren 1820e (Bell Bib)	18) (N (NA)
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04182006	Chg-LLC	CR2E	083 (11/05)	`	
City & State		City & State		4. FEI Numbe 86-1	137211		<u> </u>	plied For Applicable	
Zip	Country Zip Cau		Country	y	5. Certificate	of Status Desired	X	\$5.00 Add Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
KING, ANN	NΔ			Name					
18181 NE 31ST COURT #2407				Street Address (P.O. Box Number is Not Acceptable)					
AVENTURA, FL 33160									
				City FL Zip Code					
	named entity submits this statement for ions of registered agent.	r the purpose of changing its re	egistered	d office or registe	red agent, or bot	h, in the State of Flo	rida, 1 am	familiar with,	and accept
tilo obligat	A	- Anna F	15	<i>~</i>		1 -	6 -	a h	
SIGNATURE .	Signature, typed or printed name of registered agent	and tiller Lappicable. (NOTE: F	Registered A	Apert signature require	d when reinstating)		DATE	٦,	
Filing Fee Is \$50.00 Due by May 1, 2006 MANAGING MEMBE		DE MANAGERE				🧎 🚉 🧢 Florida	Departr	payable to ment of State	
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11. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statules. 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 FRANK HAHN (MD) VOC/06/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Date

Description of