2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT



FILED Apr 26, 2006 8:00 am Secretary of State

1. Entity Name	MENT # L05000 PADE TOWNHOMES I		c				04-26-20	•	036 ****50.	.00
Principal Place 230 PALERM CORAL GABLE		Mailing Address 230 PALERMO CORAL GABLES	AVENUE	•)3636 5	
2. Principal Pl	lace of Business	3. Mailing Addre	ss							
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			04052006	Chg-LLC	CR:	2E083 (11/05)	
City & State		City & State	City & State			4. FEI Num	ber 			pplied For ot Applicable
Zip	Country	Zip	Coun	ntry		5. Certifica	e of Status Des	ired 🗌	\$5.00 Ad Fee Require	
	6. Name and Address of C	urrent Registered Agent				7. Name ar	d Address of	New Register	ed Agent	
				Name						
	HOMAS J RMO AVENUE ABLES, FL 33134			Street A	ddress (P	O. Box Num	ber is Not Acce	ptable)		
	,			City				ĺ	FL Zip Coo	de
	named entity submits this state ions of registered agent.	ment for the purpose of cha	inging its register	ed office or	registere	d agent, or b	oth, in the State	of Florida. I	am familiar with	, and accept
SIGNATURE _	Signature, typed or printed name of register	red agent and title it applicable	(NOTE Registere	ed Agent signat	v Detruces ear	vtien reinstaling)		DA	TE	
	ling Fee is \$50.00 ue by May 1, 2006						F		ck payable to intment of Stat	te
	ue by May 1, 2006	MEMBERS/MANAGERS	10.				1		rtment of Stat	te
D.	ue by May 1, 2006	MEMBERS/MANAGERS			MGRM		ADDIT	lorida Depa	rtment of Stat	X Addition
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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 received or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.