

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050827

FILED  
Aug 15, 2006  
Secretary of State

**Entity Name:** CIMA MORTGAGE BANKERS L.L.C.

**Current Principal Place of Business:**

9485 SW 72 STREET  
SUITE A-240  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

9485 SW 72 STREET  
SUITE A-240  
MIAMI, FL 33173

**New Mailing Address:**

FEI Number: 20-2885810      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

**Name and Address of New Registered Agent:**

AMKE REGISTERED AGENS, L.L.C.  
2250 SUNTRUST INTERNATIONAL CENTER  
ONE S.E. THIRD AVE.  
MIAMI, FL 33131 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CHARISPROS FLORIDA,, INC.  
Address: 9485 SW 72 STREET  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN C. JAUREGUIZAR

COO

08/15/2006

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