2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 16, 2006 8:00 am Secretary of State 02-27-2006 90417 041 ****50.00

Principal Place of 6 5601 COLLINS AV 1516 MIAMI BEACH, FL	VE.	Malling Address P.O. BOX 2909			
		ORLANDO, FL 32802	US		
2. Principal Place Suite, Apt. #, et		3. Mailing Address 701 Sw 27 B Av E Suite, Apt. 4, etc.		v &	I INCIDENTIAL DEPORT OF THE SERVICE
City & State		City & State P			02112006 Chg-LLC CR2E083 (11/05) 4. FEI Number 332 6265 Applied For Not Applicable
Zip	Country	33/35	Country	4	5. Certificate of Status Desired Status Desired Status Desired Fee Required
6	3. Name and Address of Current R	egistered Agent			7. Name and Address of New Registered Agent
GARRIDO, GUSTAVO N 701 SW 27TH. AVE.				Name Street Address (F	(P.O. Box Number is Not Acceptable)
606 MIAMI, FL 33	135				
			'	City	FL Zip Code
turnints distribiling	g Fee is \$50.00 by May 1, 2006		du U	geri signelure required	Make check payable to Florida Department of State
9.	MANAGING MEMBER		10.	1.12	ADDITIONS/CHANGES
HAME FO	GRM DRREST, ARCHIBALDO 101 COLLINS AVE., APT. 1516 IAMI BEACH, FL 33140	Celete	NAME STREET A	ADDRESS 1-ZIP	CHIBALDO F. SOLNIE
NAME LA STREET ADDRESS 58	GR NPA, SUSANA A 101 COLLINS AVE., APT. 1516 IAMI BEACH, FL 33140	☐ Delete	TITLE HAME STREET A CITY-ST		RANA A. LAPA DE SOLNIE
NAME STREET ADDRESS CITY-ST-ZIP		□ Delate	TITLE NAME STREET A CITY-ST	ADORESS - ZIP	☐ Change ☐ Addition
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		Delete	SITLE NAME STREET A CITY-ST	ADDRESS 1-ZIP	Change Addition
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 trud 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. SIGNATURE: BIGNATURE: BIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING MANAGER MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Days Prove 9					



Division of Corporations

March 2, 2006

SUARCO INVESTMENTS, LLC 701 SW 27TH AVE 606 MIAMI, FL 33135 US

Subject: SUARCO INVESTMENTS, LLC

Reference Number: (

L05000052260

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE ANNUAL REPORTS SECTION