## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052297

Entity Name: SANDKICK INVESTMENT GROUP, LLC

FILED Apr 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8900 SW 107 AVE 10700 N. KENDALL DR. SUITE 301 SUITE 207

MIAMI, FL 33176 US MIAMI, FL 33176 US

Current Mailing Address: New Mailing Address:

8900 SW 107 AVE 10700 N. KENDALL DR. SUITE 301 SUITE 207
MIAMI, FL 33176 US MIAMI, FL 33176 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

 MARTINEZ, JUAN C
 MARTINEZ, JUAN C M

 8900 SW 107 AVE
 10700 N. KENDALL DR.

 SUITE 301
 SUITE 207

 MIAMI, FL 33176 US
 MIAMI, FL 33176 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.

ADDITIONS/CHANGES:

SIGNATURE: JUAN MARTINEZ 04/03/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete Title:

 Title:
 MGRM () Delete
 Title:
 M (X) Change () Addition

 Name:
 MARTINEZ, NUBIA
 Name:
 MARTINEZ, NUBIA

 Address:
 8900 SW 107 AVE SUITE 301
 Address:
 10700 N. KENDALL DR. UNIT 207

City-St-Zip: MIAMI, FL 33176 US City-St-Zip: MIAMI, FL 33176 US

Title: MGRM ( ) Delete Title: M (X) Change ( ) Addition Name: MARTINEZ, JUAN C Name: MARTINEZ, JUAN C

Address: 8900 SW 107 AVE SUITE 301 Address: 10700 N. KENDALL DR. UNIT 207

City-St-Zip: MIAMI, FL 33176 US City-St-Zip: MIAMI, FL 33176 US

Title: ( ) Delete Title: M ( ) Change (X) Addition

 Name:
 Name:
 DENYER, VIVIAN A

 Address:
 Address:
 10700 N. KENDALL DR.

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33176 US

 $\label{eq:Title: Title: M ( ) Change (X) Addition}$  Title: M ( ) Change (X) Addition

Name: TRISTANCHO, OLGA L

Address: Address: 10700 N. KENDALL DR. UNIT 207

City-St-Zip: City-St-Zip: MIAMI, FL 33176 US

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 MARTINEZ M 04/03/2006