

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054778

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: T & A REAL ESTATE HOLDINGS LLC

**Current Principal Place of Business:**

920 NW 197 TERRACE  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

PO BOX 297425  
SOUTH FLORIDA, FL 33029

**Current Mailing Address:**

920 NW 197 TERRACE  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

PO BOX 297425  
SOUTH FLORIDA, FL 33029

FEI Number: 20-2933741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOBCHI, ELIAS  
920 NW 197 TERRACE  
PEMBROKE PINES, FL 33029 US

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

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: TOBCHI, ELIAS  
Address: 920 NW 197 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGRM ( ) Delete  
Name: ARPAVIN, CARLOS  
Address: 920 NW 197 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33029

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TOBCHI, ELIAS  
Address: PO BOX 297425  
City-St-Zip: SOUTH FLORIDA, FL 33029 US

Title: MGRM (X) Change ( ) Addition  
Name: ARDAVIN, CARLOS  
Address: PO BOX 297425  
City-St-Zip: SOUTH FLORIDA, FL 33029

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: ELIAS TOBCHI

MGR

04/30/2006

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