

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055129

Entity Name: CATHERINE STREET, L.L.C.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

11 EVERGREEN AVE.
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

11 EVERGREEN AVE.
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 20-2900737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, LAUREN L
27 BOUGAINVILLEA AVE.
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

THOMPSON, LAUREN L
11 EVERGREEN AVE
KEY WEST, FL 33040 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:

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: THOMPSON, DEAN G
Address: 27 BOUGAINVILLEA AVE.
City-St-Zip: KEY WEST, FL 33040

Title: MGR () Delete
Name: CRESPO, DANILO
Address: 1122 17TH TERRACE
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THOMPSON, DEAN G
Address: 11 EVERGREEN AVE
City-St-Zip: KEY WEST, FL 33040

Title: MGR (X) Change () Addition
Name: CRESPO, DANILO
Address: 1200 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

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: DEAN THOMPSON

MGR

04/26/2006

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