


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

| | |
|---------------------------------------|---|
| DOCUMENT # L05000055357 |  |
| 1. Entity Name AMADOR HOLDINGS LLC | |

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|---|---|
| Principal Place of Business 301 SW 158 TERRACE 201 PEMBROKE PINES, FL 33027 US | Mailing Address 301 SW 158 TERRACE 201 PEMBROKE PINES, FL 33027 US |
|---|---|

DO NOT WRITE IN THIS SPACE



04122007 No Chg-LLC

CR2E083 (11/05)

| | |
|---|--------------------------------|
| 4. FEI Number NOT APPLICABLE | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

AMADOR, MARK R
301 SW 158 TER
201
PEMBROKE PINES, FL 33027

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE: Mark R. Conf - MARK R AMADOR - MGRM 4/12/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR AMADOR, ROLANDO 301 SW 158 TERRACE #201 PEMBROKE PINES, FL 33027 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM AMADOR, MARK R 301 SW 158 TERRACE #201 PEMBROKE PINES, FL 33027 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM DAIGLE, TANYA 2260 FIRST STREET #212 FORT MYERS, FL 33908 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

U000000712053
04/26/07-80032-013 50.00

**DO NOT WRITE
IN THIS SPACE**

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 true 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: Mark R. Conf - MARK R AMADOR 4/12/07 954-183-9929
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #