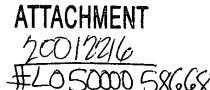
2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT

FILED Mar 02, 2006 8:00 am Secretary of State

DOCUMENT # L05000058668 1. Entity Name CAP IT OFF, L.L.C.							03-02-2006 90136 011 ****50.00				
Principal Plac 240 SOUTH SARASOTA, F	PINEAPPLE .	s Avenue, 10th Floor	Mailing Address 240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR SARASOTA, FL 34236								
2. Principal P	Place of Busin	ness	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02232006	Chg-LLC	CR2E08	3 (11/05)		
City & State			City & State			4. FEI Number	20-29955	90		plied For Applicable	
Zip	Country		Zip Coun		try	5. Certificate of Status Desired See Required \$5.00 Additional Fee Required					
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
					Name						
HANAN, BENJAMIN R 240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR SARASOTA, FL 34236					Street Address (Street Address (P.O. Box Number is Not Acceptable)					
۸· •					City		•	FL	Zip Code	,	
		y submits this statement for	red agent, or both	, in the State of Flo		miliar with,	and accept				
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and bits it applicable. (NOTE: Registered Agent storature required when reinstating) DATE											
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, 2006								e check pa Departme			
9.		MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	CHANGES			
TITLE	MGR Delete		TITL	E	•			☐ Change	☐ Addition		
NAME	1221 Glenaur Boad		N		· I						
Moronto Ontonio MET			ን ጉ		ET ADDRESS						
CITY-\$T-ZIP	INGR			-1-	-ST-ZIP						
TITLE		Desce Desce							☐ Change	☐ Addition	
NAME STREET ADDRESS	1001 Cross Timbers Rd, Suite 2014			NAM	ET ADDRESS						
CITY-ST-ZIP	· ·				-ST-ZIP						
TITLE	<u> </u>					****			Change	☐ Addition	
NAME			- Deliate	TITL: NAM	l l				0.101.91	1_3	
STREET ADDRESS				STRI	EET ADDRESS						
CITY-ST-ZIP				CITY	-ST-ZIP						
TITLE			☐ Delete	TITL	ř .				Change	☐ Addition	
NAME				NAM	IE						
STREET ADDRESS					EET ADDRESS						
CITY-ST-ZIP	ļ			ÇIIY	-ST-ZIP						
TITLE			☐ Delete	TITL	1				☐ Change	☐ Addition	
NAME STREET ADDRESS				NAM	EET ADDRESS						
CITY-ST-ZIP					-ST-ZIP						
TITLE			Delete	TITL					☐ Change	Addition	
NAME			LJ Delete	NAM	1						
STREET ADDRESS	Ì				EET ADDRESS						
CITY - ST - ZIP	1			CITY	'-ST-ZIP						
11. I hereby certify that the information supplied with this filling 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.											

Benjamin R. Hanan, Authorized Rep. 2/3/06





Mailing Address: P.O. Box 49948, Sarasota, FL 34238-6948

240 South Pineapple Avenue Sarasota, FL 34236 TEL 941-366-6660 FAX 941-366-3999

WWW.ABELBAND.COM

Jack M. Maag, Paralegal

Writer's Direct Line: (941) 364-2728
Direct E-mail: jmaag@abelband.com
Please refer to our file number: 9439-6

February 28, 2006

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

Re: Cap It Off, L.L.C.

To Whom It May Concern:

Enclosed herewith please find the 2006 Annual Report for Cap It Off, L.L.C., together with a check in the amount of \$50.00. Please file this report at your earliest opportunity.

Thank you for your cooperation in this matter.

Very truly yours,

ABEL BAND, CHARTERED

JMM

Enclosures

SARASOTA, FLORIDA

VENICE, FLORIDA

TALLAHASSEE, FLORIDA

DENVER, COLORADO