2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 01, 2006 8:00 am Secretary of State

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		certify that the information symplical with	this filing does not qualify for		ontained in Chapter 11	Q Florida Statutes 1	further certify:	that the info	rmation

limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TO TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

ATTACHMENT 20039973 #L05000003333 Jose R. Gomez C.P.A., P.A.

CERTIFIED PUBLIC ACCOUNTANT
1400 S.W. 27TH AVE.., SUITE 102 - MIAMI, FLORIDA 33145
TEL: (305) 644-1223 - FAX: (305) 644-1228

TO: <u>AVUY</u>	HO/DONGS L.L.L	DATE: 3/18/16				
	INSTRUCTIONS FOR FILING THE ATTACHED TAX RETURN					
RETURN ENCLOSED	FORM# ANNUAL REPORT	YEAR 2006 F.Y.E				
TO BE SIGNED AND DATED BY	TAXPAYER X AN OFFICER TAXPAYER AND SPOUSE ANY PARTNER (PLEASE SIGN AND DATE WHERE 'X' APPEARS. ALSO SIGN AN	AFFIX CORPORATE SEAL NOTARIZATION D DATE RETAINDED COPY FOR RECORD PURPOSES.)				
AMOUNT OF TAX	THIS IS AN ESTIMATED RETURN, WITH INSTALMENTS DUE, AS FOLLOWS: With Return due on: \$ \$ \$ THIS IS A YEAR-END RETURN. Your estimated payments amounted to \$ Your balance is due, as follows: With Return Due on: 4/30 20 06 \$ 50.00	YOUR PAYMENT RECORD Date				
MAKE CHECK PAYABLE TO	UNITED STATES TREASURY					
MAIL RETURN ONLY, TO:		DIVISION OF CORPORATIONS P.O. BOX 1500				
MAIL RETURN AND CHECK, TO:		TALLAHASSEE, FL. 32302-1500				
DUE DATE	MAY 1, 2006	· · · · · · · · · · · · · · · · · · ·				
OVER- PAYMENT	YOUR RETURN SHOWS AN OVERPAYMENT OF \$ WE HAVE INDICATED ON THE RETURN THAT SUCH AMOUNT \$ WILL BE APPLIED AGAINST YOUR ESTIMATED TAX FOR \$ IS TO BE REFUNDED TO YOU AUTOMATICALLY.					
REMARKS	TO TO BE REPORDED TO TOU AUTOR	THE AUTHOR !				