

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

03-22-2006 90292 015 \*\*\*\*55.00

DOCUMENT # L05000061978



1. Entity Name  
FLR HOLDINGS, LLC

Principal Place of Business  
125 N. E. 9 STREET  
MIAMI, FL 33132

Mailing Address  
125 N. E. 9 STREET  
MIAMI, FL 33132



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
84-1687452

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STORACE, MICHAEL R  
4720 LE JEUNE ROAD  
CORAL GABLES, FL 33146

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGR  
ROVIROSA, FRANK L  
125 N. E. 9 STREET  
MIAMI, FL 33132 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
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☐ Change ☐ Addition

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:

*Frank L. Roviro*

FRANK L. ROVIROSA 3/6/06 305 3734765

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

Date

Daytime Phone #

ATTACHMENT  
30003995  
#L05000061978

**FLR Holdings, LLC**  
125 N.E., 9<sup>th</sup> Street  
Miami, Florida 33132

March 27, 2006

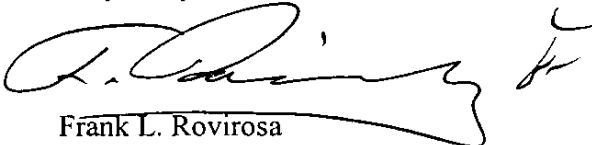
Florida Department of State  
Division of Corporations  
P.O. Box # 6478  
Tallahassee, Florida 32314

RE: Your letter of March 23<sup>rd</sup>, 2006  
**L05000061978**

Dear Sirs:

In compliance with your request, enclosed please find the document of the reference showing our FEDERAL EMPLOYER I.D. (FEI) in Block No. 4.

Very Truly Yours,

  
Frank L. Rovirosa

FLR/emp