

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065021

**FILED**  
**Apr 25, 2006**  
**Secretary of State**

**Entity Name:** TROUBLEMAKER CHARTERS, LLC

**Current Principal Place of Business:**

2159 CORAL WAY  
MIAMI, FL 33145

**New Principal Place of Business:**

1200 PONCE DE LEON BOULEVARD  
1ST FLOOR  
CORAL GABLES, FL 33134 US

**Current Mailing Address:**

2159 CORAL WAY  
MIAMI, FL 33145

**New Mailing Address:**

1200 PONCE DE LEON BOULEVARD  
1ST FLOOR  
CORAL GABLES, FL 33134 US

**FEI Number:** 20-3082424

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOORE & CO., P.A.  
355 ALHAMBRA CIRCLE  
SUITE 1100  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** ABELE, CHARLES R JR.  
**Address:** 2159 CORAL WAY  
**City-St-Zip:** MIAMI, FL 33145

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** ABELE, CHARLES R JR.  
**Address:** 1200 PONCE DE LEON BOULEVARD  
**City-St-Zip:** CORAL GABLES, FL 33134

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:** CHARLES R. ABELE. JR.

MNGR

04/25/2006

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