

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2006 8:00 am
Secretary of State

01-18-2006 90004 009 ****50.00

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DOCUMENT # L05000065027 1. Entity Name A.G.BARRIOS AT SEA, LLC.					
Principal Place of Business 400 S. DIXIE HIGHWAY, CORAL GABLES, FL 33146			Mailing Address 400 S. DIXIE HIGHWAY, CORAL GABLES, FL 33146		
2. Principal Place of Business 365 Palermo		3. Mailing Address 365 Palermo			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Coral Gables, FLA.		City & State Coral Gables, FLA.		4. FEI Number 01132006 Chg-LLC CR2E083 (11/05)	
Zip 33134		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FLORIDIAN YACHT SALES LLC 400 S. DIXIE HIGHWAY CORAL GABLES, FL 33146			7. Name and Address of New Registered Agent Name Hector D. Fortun Street Address (P.O. Box Number is Not Acceptable) 365 Palermo City Coral Gables FL Zip Code 33134		
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 Hector D. Fortun 1-13-06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
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	MGRM GORRIN, ALVARO 400 S. DIXIE HIGHWAY CORAL GABLES, FL 33146	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FORTUN, HECTOR D. 365 PALERMO CORAL GABLES, FL 33134
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> 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: ATTORNEY FOR HECTOR D. FORTUN			Date 1-13-06 Daytime Phone # (305) 444-1446		