

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068531

Entity Name: HERB'S HID AWAY LLC

FILED
Apr 05, 2006
Secretary of State

Current Principal Place of Business:

18348 104TH TERRACE SOUTH
BOCA RATON, FL 33498 PB

New Principal Place of Business:

235 HWY 441 SE
OKEECHOBEE, FL 34974 US

Current Mailing Address:

18348 104TH TERRACE SOUTH
BOCA RATON, FL 33498 PB

New Mailing Address:

18348 104TH TERRACE SOUTH
BOCA RATON, FL 33498 US

FEI Number: 75-3195815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALKHASIAN, LEVON
18348 104TH TERRACE SOUTH
BOCA RATON, FL 33498 PB US

Name and Address of New Registered Agent:

MALKHASIAN, LEVON
18348 104TH TERRACE SOUTH
BOCA RATON, FL 33498 US

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:

04/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MALKHASIAN, LEVON
Address: 18348 104TH TERRACE SOUTH
City-St-Zip: BOCA RATON, FL 33498 PB

Title: MGRM (X) Delete
Name: PARONYAN, AKOP
Address: 10815 CYPRESS BEND DRIVE
City-St-Zip: BOCA RATON, FL 33498 PB

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MALKHASIAN, LEVON
Address: 18348 104TH TERRACE SOUTH
City-St-Zip: BOCA RATON, FL 33498 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LEVON MALKHASIAN

MGRM

04/05/2006

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