

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jun 09, 2006 8:00 am
Secretary of State

05-01-2006 90065 020 ****55.00

DOCUMENT # L05000068603					
1. Entity Name TRIESTE LAND VENTURES LLC					
Principal Place of Business 929 CLINT MOORE ROAD BOCA RATON, FL 33487 US			Mailing Address PO BOX 27225 SAN DIEGO, CA 92198 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-3159731	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent KOSLOW, HOWARD 929 CLINT MOORE ROAD BOCA RATON, FL 33487			7. Name and Address of New Registered Agent		
			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 renewing)					
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	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	COTA, DANIEL		NAME		
STREET ADDRESS	PO BOX 27225		STREET ADDRESS		
CITY - ST - ZIP	SAN DIEGO, CA 92198		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HELMER, DONALD		NAME		
STREET ADDRESS	1553 WYATT PLACE		STREET ADDRESS		
CITY - ST - ZIP	EL CAJON, CA 92020		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	BARONOFF, PETER		NAME		
STREET ADDRESS	929 CLINT MOORE ROAD		STREET ADDRESS		
CITY - ST - ZIP	BOCA RATON, FL 33487		CITY - ST - ZIP		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	KOSLOW, HOWARD		NAME		
STREET ADDRESS	929 CLINT MOORE ROAD		STREET ADDRESS		
CITY - ST - ZIP	BOCA RATON, FL 33487		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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: <u>Daniel A. Cota</u>			Date: <u>4/27/06</u> 619-316-1207		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					