

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

07-05-2006 90104 006 ****50.00

DOCUMENT # L05000077133					
1. Entity Name EL RETIRO LLC					
Principal Place of Business 4677 GLENEAGLES DRIVE BOYNTON BEACH, FL 33436			Mailing Address 4677 GLENEAGLES DRIVE BOYNTON BEACH, FL 33436		
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 20-4111335	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SABERSON, ROGER G 70 S.E. 4TH AVENUE DELRAY BEACH, FL 33483			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 entry 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 _____ (NOTE: Registered Agent signature required when reissuing)					
Filing Fee is \$50.00 Due by September 6, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
			MERM AUGUSTO LOPEZ-PORRES 4677 GLENEAGLES DR. BOYNTON FL 33436		
			MERM DAVID PORODOMINSKY 2555 NW 23RD WAY BOCA RATON FL 33431-4010		
			MERM ANTHONY SAKKA 6598 NEW PORT LAKE CIRCLE BOCA RATON FL 33496		
	☒ Delete		MERM AUGUSTO HOYLE 6088 BITTER WAY LAKE WORTH FL 33467-8735		
MERM CATHERINE CHOI			MERM ELIANA CARDENAL 4815 REGENCY COURT BOCA RATON FL 33434		
	☐ Delete		MERM KATHERINE PATIAS 1462 SOUTH CLUB DRIVE WELLINGTON FL 33414		
	☐ Delete				
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 606, Florida Statutes.					
SIGNATURE: 			Date: JULY 21 2006 561-7381131		
SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					