


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-08-2006 90042 034 ****50.00

| | | | |
|--|---------------------------------|---|---|
| DOCUMENT # L05000081934 | |  | |
| 1. Entity Name JAGMAR INVESTMENTS LLC | | | |
| Principal Place of Business 19431 SW 30 STREET MIRAMAR, FL 33029 | | Mailing Address 19431 SW 30 STREET MIRAMAR, FL 33029 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |
| 6. Name and Address of Current Registered Agent BUSINESS FILINGS INCORPORATED 1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE, FL 32301-2960 | | 7. Name and Address of New Registered Agent | |
| Name | | Name | |
| Street Address (P.O. Box Number is Not Acceptable) | | Street Address (P.O. Box Number is Not Acceptable) | |
| City | | City | Zip Code |
| FL | | | |
| 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 _____ | | DATE _____ | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) | | | |
| 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! | TITLE | |
| NAME | GUERRA, JORGE | NAME | |
| STREET ADDRESS | 19431 SW 30 STREET | STREET ADDRESS | |
| CITY - ST - ZIP | MIRAMAR, FL 33029 | CITY - ST - ZIP | |
| | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE | | TITLE | |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY - ST - ZIP | | CITY - ST - ZIP | |
| | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE | | TITLE | |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY - ST - ZIP | | CITY - ST - ZIP | |
| | <input type="checkbox"/> Delete | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE | | TITLE | |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY - ST - ZIP | | CITY - ST - ZIP | |
| | <input type="checkbox"/> Delete | | <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: <i>J. Guerra</i> | | Date: 2-28-06 | Daytime Phone #: 786-514-4657 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE | | Date | Daytime Phone # |





ATTACHMENT

30063035

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2006

JAGMAR INVESTMENTS LLC
19431 SW 30 STREET
MIRAMAR, FL 33029

Subject: JAGMAR INVESTMENTS LLC

Reference Number: L05000081934

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cj
ANNUAL REPORTS SECTION