## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

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DOCUMENT # L05000082052  1. Entity Name BB & B HOTEL MANAGEMENT, LLC.							90268 023 ****5	
	e of Business AND PARK BLVD., STE. 105 IALE, FL 33334	Mailing Address 120 E. OAKLAND PARK FT. LAUDERDALE, FL 3		TE. 105	   <b>                                   </b>	FOID I BIIII BOIN OOM BON	)	<b>153</b> 1   6 <b>165</b> 1
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03032006	Chg-LLC	CR2E083 (11/05)	`	
City & State		City & State		4. FEI Numbe	334 0912	A	oplied For ot Applicable	
· Zip	Country	Zip	Country	y 	1	of Status Desired	□ \$5.00 Ad Fee Require	
	6. Name and Address of Current	Registered Agent		·	7. Name and	Address of New Ro	egistered Agent	
	AN C ESQ XIE HIGHWAY, STE. 870 ABLES, FL 33146		_	Name Street Address (P.O. Box Numb		er is Not Acceptable	)	
			F	City			FL Zip Cox	le
	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent a			d office or register		h, in the State of Flo	rida. I am familiar with	and accept
Filing Fee is \$50.00 Due by May 1, 2006					:		s check payable to Department of Stat	ie
9.	MANAGING MEMBE				1			\$ 5
TITLE NAME	MODIA	RS/MANAGERS	10.			ADDITIONS/	CHANGES	**
STREET ADDRESS CITY-ST-ZIP	MGRM BERGER, HARRY 120 E. OAKLAND PARK BLVD., 1 FT. LAUDERDALE, FL 33334	☐ Delete	TITLE NAME	ADDRESS IT-ZIP		ADDITIONS/	CHANGES Change	Addition
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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: SIGNATURE AND TYPED OR BRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #