

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90426 040 ****50.00

DOCUMENT # L05000082886

1. Entity Name

ERIN RICHARD HOLDING II, LLC



Principal Place of Business

1230 NE 9TH AVENUE
FORT LAUDERDALE FL 33304-2013
US

Mailing Address

1230 NE 9TH AVENUE
FORT LAUDERDALE FL 33304-2013
US



2. Principal Place of Business

1950 N.W 15th ST.

3. Mailing Address

1950 N.W 15th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/05)

City & State

Pompano Beach

City & State

Pompano Beach

4. FEI Number

20-3434199

Applied For

Not Applicable

Zip

Country

Zip

Country

33069

33069

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BEDARD, PAUL
1230 NE 9TH AVENUE
FORT LAUDERDALE FL 33304-2013

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 reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME BEDARD, PAUL
STREET ADDRESS 1230 NE 9TH AVENUE
CITY-ST-ZIP FORT LAUDERDALE FL 33304-2013

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Feb 13th/06 951 9070280