

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091055

Entity Name: TABARRE CENTER LLC

FILED
Aug 18, 2006
Secretary of State

Current Principal Place of Business:

3705 SW 14 ST
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

3705 SW 14 ST
FT. LAUDERDALE, FL 33312 US

Current Mailing Address:

3705 SW 14 ST
FT. LAUDERDALE, FL 33312

New Mailing Address:

3705 SW 14 ST
FT. LAUDERDALE, FL 33312 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHERY, WILBERT
3705 SW 14 ST
FT. LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: CHERY, WILBERT
Address: 3705 SW 14 ST
City-St-Zip: FT LAUDERDALE, FL 33312

Title: VP () Delete
Name: JOSEPH, VLADIMIR
Address: 3705 SW 14 ST
City-St-Zip: FT LAUDERDALE, FL 33312

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: CHERY, WILBERT
Address: 3705 SW 14 ST
City-St-Zip: FT LAUDERDALE, FL 33312 US

Title: VP (X) Change () Addition
Name: JOSEPH, VLADIMIR
Address: 3705 SW 14 ST
City-St-Zip: FT LAUDERDALE, FL 33312 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILBERT CHERY

P

08/18/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date