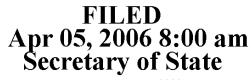
## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT



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1. Entity Nam	MENT # L05000095	790				04-05-2006 9	•		
Principal Plac	e of Business	Mailing Address				200	2460	Ω	
529 SW 3RD AVE.		529 SW 3RD AVE.		20024980					
APT#1 FORT LAUDE	RDALE, FL 33315	APT#1 Fort Lauderdale, Fl	33315	i		8811: 1111: 1811: 1811: 1811	I ANIMA INTOKA	HIL I <b>leil</b> I <b>s</b> iu <b>fi</b>	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03232006	Chg-LLC	CR2E	083 (11/05)		
City & State		City & State		4. FEI Numb	016037	77	No	plied For ot Applicable	
Zip	Country	Zip	Count	try		of Status Desired		\$5.00 Add Fee Require	iltional d
	6. Name and Address of Current	Registered Agent -		Name	7. Name and	Address of New R	egistered .	Agent	
MORAN, J 529 SW 3F				(P.O. Box Number is Not Acceptable)					
APT#1   FORT LAU	JDERDALE, FL 33315								
	•			City			FL	Zip Cod	е
	named entity submits this statement folions of registered agent.	r the purpose of changing its r	registere	ed office or registe	ered agent, or bo	th, in the State of Flo	rida. I am	familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	: Aegistered	d Agent signature require	d when reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2006									
					,			ayable to ent of State	Ð
		RS/MANAGERS	10.				Departm	ent of State	9
9. TITLE	ue by May 1, 2006  MANAGING MEMBE  MGRM	RS/MANAGERS	TITLE			Florida	Departm	ent of State	Addition
9. TITLE NAME	MGRM MORAN, JOSE R		TITLE	E		Florida	Departm	ent of State	
9. TITLE	ue by May 1, 2006  MANAGING MEMBE  MGRM	☐ Delete	TITLE NAMI STRE			Florida	Departm	ent of State	
9. TITLE NAME STREET ADDRESS	MANAGING MEMBE  MORAN, JOSE R  529 SW 3RD AVE. APT#1	☐ Delete	TITLE NAMI STRE	E ET ADDRESS -ST-ZIP		Florida	Departm	ent of State	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE  MORAN, JOSE R  529 SW 3RD AVE. APT#1	□ Delete	TITLE NAMI STRE CITY TITLE NAMI	E EET ADDRESS -ST-ZIP E		Florida	Departm	Change	☐ Addition
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trustee empowered to execute this report as required by Chapter 608, Florida Statutes. limited liability company or the receiver of

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