

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096135

FILED
Jul 05, 2006
Secretary of State

Entity Name: TWO LANDS LIMITED LIABILITY COMPANY

Current Principal Place of Business:

12216 S.W. 111 TERRACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12216 S.W. 111 TERRACE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 83-0439574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

REYES, BLANCA
13370 SW 114 LANE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

REYES, BLANCA
12216 SW 111 TERRACE
MIAMI, FL 33186 US

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:

07/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: REYES, BLANCA
Address: 13370 SW 114 LANE
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: REYES, JORGE
Address: 13370 SW 114 LANE
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: REYES, BLANCA
Address: 12216 SW 111 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: MGRM (X) Change () Addition
Name: REYES, JORGE
Address: 12216 SW 111 TERRACE
City-St-Zip: MIAMI, FL 33186

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: BLANCA REYES

MGRM

07/05/2006

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