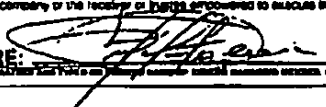


FILED
Apr 17, 2006 8:00 am
Secretary of State

02-13-2006 90247 001 ***100.00

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000099309			
1. Entity Name SANTOLI SO, LLC			
Principal Place of Business 1200 BRICKELL AVENUE, SUITE 800 MIAMI, FL 33131		Mailing Address 1200 BRICKELL AVENUE, SUITE 800 MIAMI, FL 33131	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent LOPEZ, PETER M 1200 BRICKELL AVENUE, SUITE 800 MIAMI, FL 33131		5. Name and Address of Prior Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
6. 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, last name, first name of registered agent and title of employee (SEE: Registered Agent signature required when submitting)			
Filing Fee is \$50.00 Due by May 1, 2006		State check payable to Florida Department of State	
A. MANAGING MEMBERS/MANAGERS		B. ADDITIONS/CHANGES	
NAME STREET ADDRESS CITY-STATE-ZIP [X] Delete	NAME STREET ADDRESS CITY-STATE-ZIP [X] Delete	NAME STREET ADDRESS CITY-STATE-ZIP [X] Change [X] Addition	NAME STREET ADDRESS CITY-STATE-ZIP [X] Change [X] 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 Statute. I further certify that the information indicated on this report is true and accurate and that my signature (s) 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 of funds or powers to execute this report as required by Chapter 605, Florida Statute.			
SIGNATURE: 		managing member 9/7/06	