

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102582

Entity Name: INVESTMENTS BLC, LLC

FILED
Feb 10, 2006
Secretary of State

Current Principal Place of Business:

20533 BISCAYNE BLVD
113
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20533 BISCAYNE BLVD
113
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 04-3831168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EPPEL, DAVID
20533 BISCAYNE BLVD
113
AVENTURA, FL 33180 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: MGRM () Delete
Name: PRONTO BAIT, LLC,
Address: 2271 W 77 ST
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: HELAL INVESTMENTS, L, LC
Address: 21033 NE 34 PL
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: COHEN, JACOBO
Address: 20533 BISCAYNE BLVD #113
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PRONTO BAIT, LLC,
Address: 1625 NORTH COMMERCE PARKWAY, SUITE 315
City-St-Zip: WESTON, FL 33326

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PRONTO BAIT, LLC

MGRM

02/10/2006

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