

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104345

FILED
Jan 07, 2006
Secretary of State

Entity Name: TERRACE INVESTMENTS LLC

Current Principal Place of Business:

345 BAYSHORE BLVD #1506
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

345 BAYSHORE BLVD #1506
TAMPA, FL 33606

New Mailing Address:

P.O. BOX 3332
DANA POINT, CA 92629

FEI Number: 20-0254094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: ISLAND VILLA MANAGEM, ENT, LTD
Address: 345 BAYSHORE BLVD #1506
City-St-Zip: TAMPA, FL 33606

Title: MGRM (X) Delete
Name: ROSS, EDWARD M
Address: 34332 COVE LANTERN
City-St-Zip: DANA POINT, CA 92629

Title: MGRM (X) Delete
Name: JANEDIS, MICHEL
Address: 4855 SANTO DR
City-St-Zip: OAK PARK, CA 91377

ADDITIONS/CHANGES:

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

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: EM ROSS

MGR

01/07/2006

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