

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000114761

**FILED**  
**May 06, 2006**  
**Secretary of State**

**Entity Name:** CARIBBEAN GETAWAYS-WEDDINGS IN JAMAICA, LLC

**Current Principal Place of Business:**

817 N.W. 91 TERRACE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

817 N.W. 91 TERRACE  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 20-3906984      **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:**

**Name and Address of New Registered Agent:**

ACCOUNTING & TAXES 2000 PLUS, LLC  
16705 NE 19TH AVENUE  
NORTH MIAMI BEACH, FL 33162      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: CALVERT, KATHLEEN  
Address: 817 N.W. 91 TERRACE  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

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: KATHLEEN CALVERT

MGR

05/06/2006

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