2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 28, 2008 08:00 AM Secretary of State

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1. Entity Name 706 INVESTMENTS LLC



Principal Place of Business

828 NE 17TH WAY-UNIT #3 FORT LAUDERDALE, FL 33304 Mailing Address

P.O. BOX 4567

FORT LAUDERDALE, FL 33338



04102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-3898620		Not Applicable
5. Certificate of Status Desired		0 Additional

6. Name and Address of Current Registered Agent

CAMPBELL, PHILIP 828 NE 17TH WAY, UNIT #3 FORT LAUDERDALE, FL 33304

, the obligations of registered agent.

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SIGNATURE	• • • • • • • • • • • • • • • • • • •		•
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent aignature required when reinstating)	DATE
FILI After Ma	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		000000927282 05/20/08-80100-024 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CAMPBELL, PHILIP 828 NE 17TH WAY-UNIT #3 FORT LAUDERDALE, FL 33304		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADDISON, PETER J 828 NE 17TH WAY-UNIT #3 FORT LAUDERDALE, FL 33304		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE
TITLE NAME STREET ADDRESS			

8. 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

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 the report as required by Chapter 608, Florida Statutes.

SIGNATURE: __

TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNARY MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/22/88 9x452x1257