2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000120206

SUNRISE, FL 33313

City-St-Zip:

Entity Name: UNITED INVESTMENT PARTNERS, LLC

FILED Sep 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 760 N.W. 68TH AVENUE 8702 NW 44TH ST PLANTATION, FL 33317 SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** 760 N.W. 68TH AVENUE 8702 NW 44TH ST PLANTATION, FL 33317 SUNRISE, FL 33351 FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () 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: DYGES, ORVILLE F 7233 N.W. 49TH CT. LAUDERHILL, FL 33319 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MONTAQUE, ROBERT S SR. Name: Name: 6523 S.W. 19TH ST. Address: Address: City-St-Zip: NORTH LAUDERDALE, FL 33068 City-St-Zip: Title: Title: (X) Change () Addition () Delete SMITH, JOAN Name: THOMAS, WIDWELL W Name: Address: 760 N.W. 68TH AVENUE Address: 8702 NW 44TH ST. City-St-Zip: PLANTATION, FL 33317 City-St-Zip: SUNRISE, FL 33351 Title: () Delete Title: (X) Change () Addition DYGES, SHELIE-ANN D DYGES, KAY A Name: Name: 7233 N.W. 49TH CT. 8702 NW 44TH ST. Address: Address: City-St-Zip: LAUDERHILL, FL 33319 City-St-Zip: SUNRISE, FL 33351 Title: VTR () Delete Title: () Change () Addition Name: THOMAS, ANGELA Name: Address: 4650 N.W. 93RD AVE. Address: City-St-Zip: SUNRISE, FL 33351 City-St-Zip: Title: SCTY () Delete Title: SCTY (X) Change () Addition DYGES, KAY A CABALLERO-THOMPSON, JULIET Name: Name: 5966 N.W. 28TH ST. 8702 NW 44TH ST. Address: Address:

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.

City-St-Zip:

SUNRISE, FL 33351

SIGNATURE: KAY DYGES TR 09/05/2006