

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000121675

FILED
Aug 18, 2006
Secretary of State

Entity Name: BROTHERS AND COUSINS GROUP, LLC

Current Principal Place of Business:

874 S.W. TROUVILLE AVENUE
PORT ST. LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

874 S.W. TROUVILLE AVENUE
PORT ST. LUCIE, FL 34953

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

JOHNSON, HENRY W
1401 UNIVERSITY DRIVE, #301
CORAL SPRINGS, FL 33071 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: MGRM () Delete
Name: THELUSMA, FRANTZO
Address: 402 S. 26TH AVENUE
City-St-Zip: HOLLYWOOD, FL 34953

Title: MGRM () Delete
Name: ULYSSE, HENOC
Address: 4970 S.W. 8TH STREET
City-St-Zip: MARGATE, FL 33068

Title: MGRM () Delete
Name: ULYSSE, RENAULT
Address: 874 S.W. TROUVILLE AVENUE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGRM () Delete
Name: ULYSSE, SIMON
Address: 282 N.W. 43RD STREET
City-St-Zip: OAKLAND PARK, FL 33309

Title: MGRM () Delete
Name: DORLEUS, ALBERIQUE
Address: 112 S.W. MILBURN CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THELUSMA, FRANTZO
Address: 3731 SW LAFLEUR ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

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

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: FRANTZO THELUSMA

MGRM

08/18/2006

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