2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122670

City-St-Zip: HALLANDALE BEACH, FL 33009

Entity Name: GOLDCREST, LLC.

FILED Mar 15, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
Current P	inicipal Flace of Business.	New Fillicipal Flace	or Busiliess.	
12930 SW SUITE 104 MIAMI, FL				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
12930 SW SUITE 104 MIAMI, FL				
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
SUITE 104 MIAMI, FL The above	128 STREET	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATUF				
	Electronic Signature of Registered A	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () Delete SIMON, STEVE 12930 SW 128 STREET, SUITE 104 MIAMI, FL 33186	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete SIMON, STEVE 12930 SW 128 STREET, SUITE 104 MIAMI, FL 33186	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete CHIRLA, IONEL & DORINA 3785 SLEPPY FOX ROCHESTER HILLS, MI 48309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete CHIRLA, BENJAMIN 4510 WEST OAKLAND PARK BLVD., SUITE 207 LAUDERDALE LAKES, FL 33313	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete AHMAD, RAMZY	Title: Name:	() Change () Addition	

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:

SIGNATURE: STEVE SIMON MGR 03/15/2006