

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L95000000415

1. Entity Name  
AUBERGE, A LIMITED COMPANY



**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90023 020 \*\*\*\*55.00

Principal Place of Business  
1725 TAYLOR STREET  
HOLLYWOOD, FL 33020

Mailing Address  
3535 MAGELLAN CIRCLE, #522  
AVENTURA, FL 33180

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03012006 Chg-LLC CR2E083 (11/05)

4. FEI Number  
65-0607669

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

METZGER, AMY S  
1725 TAYLOR STREET  
HOLLYWOOD, FL 33020

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2006

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE VP  
NAME METZGER, AMY  
STREET ADDRESS 1725 TAYLOR STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33020 ☐ Delete

TITLE *MEM*  
NAME *manilyn metton*  
STREET ADDRESS *1612 Sawdust Street*  
CITY-ST-ZIP *Thousand Oaks CA 91361* ☐ Change ☒ Addition

TITLE P  
NAME METZGER, AUTHUR  
STREET ADDRESS 1725 TAYLOR STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33020 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MEM  
NAME METZGER, GARY  
STREET ADDRESS 1725 TAYLOR STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33020 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MEM  
NAME METZGER, LESLIE  
STREET ADDRESS 1725 TAYLOR STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33020 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MEM  
NAME PARISI, JEAN  
STREET ADDRESS 1725 TAYLOR STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33020 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MEM  
NAME MELTON, CAROL  
STREET ADDRESS 1725 TAYLOR STREET  
CITY-ST-ZIP HOLLYWOOD, FL 33019 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING-MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*4/14/06 (305) 807-1141*

• Make at