


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000003335 1. Entity Name 116 ALHAMBRA, L.L.C.	
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Principal Place of Business 116 ALHAMBRA CIRCLE, SUITE J CORAL GABLES, FL 33134	Mailing Address 116 ALHAMBRA CIRCLE, SUITE J CORAL GABLES, FL 33134
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01312006 No Chg-LLC

CR2ED83 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0925410	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

BEAME, LAWRENCE
116 ALHAMBRA CIRCLE, SUITE J
CORAL GABLES, FL 33134

**DO NOT WRITE
IN THIS SPACE**

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 re-registering)

DATE

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

1100000420559
02/15/06-80063-005 \$5.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEAME, LAWRENCE 13611 DEERING BAY DRIVE UNIT 504 CORAL GABLES, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OLGA PIZZI GARCIA 9740 SW 60TH COURT PINECREST, FL 33158
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERBERT, DAVID 5901 SW 21ST STREET FORT LAUDERDALE, FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

Date

Daytime Phone ()