


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90089 038 ****50.00

DOCUMENT # L99000007919
1. Entity Name
BREEZEWAY REALTY, L.L.C.



Principal Place of Business Mailing Address
13105 NORTHWEST 42ND AVENUE 13105 NORTHWEST 42ND AVENUE
OPA LOCKA, FL 33054 US OPA LOCKA, FL 33054 US

20006103

DO NOT WRITE IN THIS SPACE



01092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-0962171	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLLAND, BRIAN D
13105 NORTHWEST 42ND AVENUE
OPA LOCKA, FL 33054

**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 reinstating) DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHAPLIN, WAYNE E 1600 N.W. 163RD STREET MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOLLAND, BRIAN 13105 NORTHWEST 42ND AVENUE OPA LOCKA, FL 33054
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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 # _____