

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092326

FILED  
May 02, 2006  
Secretary of State

Entity Name: 5599 SE 127TH PLACE LLC

**Current Principal Place of Business:**

14833 SW 166 STREET  
MIAMI, FL 33177

**New Principal Place of Business:**

14833 SW 166 STREET  
MIAMI, FL 33187

**Current Mailing Address:**

14833 SW 166 STREET  
MIAMI, FL 33177

**New Mailing Address:**

14833 SW 166 STREET  
MIAMI, FL 33187

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:**

LEMUS, OBDULLA  
14833 SW 166 STREET  
MIAMI, FL 33177    US

**Name and Address of New Registered Agent:**

LEMUS, OBDULIA  
14833 SW 166 STREET  
MIAMI, FL 33187    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: OBDULIA LEMUS

05/02/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ANGEL, BARBARA  
Address: 21133 SW 85TH AVE. #314  
City-St-Zip: MIAMI, FL 3389

Title: MGRM ( ) Delete  
Name: LEMUS, ODULLA  
Address: 14833 SW 166 STREET  
City-St-Zip: MIAMI, FL 33177

Title: MGRM ( ) Delete  
Name: GONZALEZ, JOEL  
Address: 9384 STERLING DRIVE  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ANGEL, BARBARA  
Address: 21133 SW 85TH AVE. #314  
City-St-Zip: MIAMI, FL 33189

Title: MGRM (X) Change ( ) Addition  
Name: LEMUS, OBDULIA  
Address: 14833 SW 166 STREET  
City-St-Zip: MIAMI, FL 33187

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: OBDULIA LEMUS

MGRM

05/02/2006

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