

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091896

FILED
Mar 17, 2006
Secretary of State

Entity Name: JS BUILDING SERVICE LLC

Current Principal Place of Business:

502 CHAPEL TRACE
108
ORLANDO, FL 32807

New Principal Place of Business:

9931 SHADOW CREEEK DR
ORLANDO, FL 32832

Current Mailing Address:

502 CHAPEL TRACE
108
ORLANDO, FL 32807

New Mailing Address:

9931 SHADOW CRREK DR
ORLANDO, FL 32832

FEI Number: 20-2034784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, JAIME A
502 CHAPEL TRACE
108
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

SANCHEZ, JAIME A
9931 SHADOW CREEK DR
ORLANDO, FL 32832 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:

03/17/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SANCHEZ, JAIME A
Address: 502 CHAPEL TRACE APT 108
City-St-Zip: ORLANDO, FL 32807

Title: MGRM () Delete
Name: SANCHEZ, JAIME
Address: 502 CHAPEL TRACE APT 108
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SANCHEZ, JAIME A
Address: 9931 SHADOW CREEK DR
City-St-Zip: ORLANDO, FL 32832

Title: MGRM (X) Change () Addition
Name: SANCHEZ, JAIME
Address: 9931 SHADOW CREEK DR
City-St-Zip: ORLANDO, FL 32832

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: SANCHEZ JAIME

MGR

03/17/2006

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