2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Mar 16, 2006 8:00 am Secretary of State **DOCUMENT # L05000042178** 1. Entity Name 03-01-2006 90228 031 ****50.00 A2BRUT, LLC Principal Place of Business Mailing Address 18 HARBOR ISLAND DRIVE KEY LARGO FL 33037 US 18 HARBOR ISLAND DRIVE KEY LARGO FL 33037 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) 4. FEI Number City & State City & State Applied For EIN 65-1250289 Not Applicable Zin Country... Country \$5.00 Additional 5. Certificate of Status Dosined Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BIRSH, ARTHUR Street Address (P.O. Box Number is Not Acceptable) 18 HARBOR ISLAND DRIVE KEY LARGO FL 33037 Cilv 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 FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 9. 10 ADDITIONS/CHANGES MGRM DILE Delete ☐ Change Addition BIRSH, ARTHUR NALE NAME STREET ADDRESS STREET ADDRESS 18 HARBOR ISLAND DRIVE CITY-ST-ZP KEY LARGO FL 33037 CITY-ST-7/P MGRM Delete TITLE ☐ Change ■ Addition TITLE ZAKON, ALAN MAME STREET ADDRESS 32 CARDINAL LANE STREET ADDRESS CITY-ST-ZIP KEY LARGO FL 33037 CITY-S1-ZIP TITLE ___ Detete_ TIFLE Change Addition NAM STREET ADDRESS STREET ADDRESS C117-S1-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7/P CITY-ST-ZIP □ Detete ☐ Change ■ Addition BRE TI¶ ₽ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-71P CITY-ST-ZIP 11. I hereby certify that the information supplies with this filing does not qualify for the exemptions contained in Section 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 logal 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:

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2006

A2BRUT, LLC 18 HARBOR ISLAND DRIVE KEY LARGO, FL 33037 US

Subject: A2BRUT, LLC

Reference Number:

1205000042178

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) vnumber or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/mh ANNUAL REPORTS SECTION

Sorry. countrily else was perpetus.

Rost time-will not happen again.