

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062462

FILED
Apr 19, 2006
Secretary of State

Entity Name: DRYCLEANING DELIVERY SYSTEMS, LLC

Current Principal Place of Business:

3834 SOUTH DALE MABRY HWY
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

3834 SOUTH DALE MABRY HWY
TAMPA, FL 33611

New Mailing Address:

FEI Number: 20-2990667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMMASINI, ROBERT
205 S. TREASURE DR.
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TOMMASINI, SHERYL
Address: 205 S. TREASURE DR
City-St-Zip: TAMPA, FL 33609

Title: MGRM () Delete
Name: LOSCALZO, RICHARD
Address: 17731 LONG RIDGE RD.
City-St-Zip: TAMPA, FL 33647

Title: MGRM () Delete
Name: TOMMASINI, ROBERT
Address: 205 S. TREASURE DR
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT TOMMASINI

MGRM

04/19/2006

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