

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 08, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000034173	
1. Entity Name ALL AMERICAN IPA, LLC	

Principal Place of Business 5350 SPRING HILL DR SPRING HILL, FL 34606	Mailing Address 5350 SPRING HILL DR SPRING HILL, FL 34606
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DO NOT WRITE IN THIS SPACE



01032006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 02-0668172	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent AUGELLO, AGNES 5350 SPRING HILL DR SPRING HILL, FL 34606
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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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____
Signature typed or printed name of registered agent and title if applicable

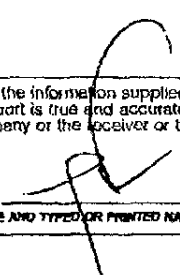
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AURO S MANAGEMENT, LLC 5350 SPRING HILL DR SPRING HILL, FL 34606
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03/18/06-80033-019 50.00

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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: 	PARIKSITH SINGH	3/3/06	352-688-8116
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date	Daytime Phone #