

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002203

Entity Name: ASP ENTERPRISES LLC

FILED  
Jan 14, 2006  
Secretary of State

**Current Principal Place of Business:**

5465 EAGLE LAKE DR  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

5465 EAGLE LAKE DR  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

FEI Number: 74-2979197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PICARELLI, ALBERT S  
5465 EAGLE LAKE DR  
PALM BEACH GARDENS, FL 33418 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: PICARELLI, ALBERT S  
Address: 5465 EAGLE LAKE DR  
City-St-Zip: WEST PALM BEACH, FL 33418 US

Title: MGRM ( ) Delete  
Name: BARNEY, CATHY  
Address: 5465 EAGLE LAKE DR  
City-St-Zip: PALM BEACH GARDENS, FL 33418

**ADDITIONS/CHANGES:**

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: ALBERT S. PICARELLI

MGRM

01/14/2006

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