

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90036 001 ***100.00

DOCUMENT # L00000005977
 1. Entity Name
 ATALLA'S QUICK STOP, L.L.C.



Principal Place of Business
 1020 SOUTH W.C. OWENS AVE.
 CLEWISTON, FL 33440

Mailing Address
 1020 SOUTH W.C. OWENS AVE.
 CLEWISTON, FL 33440

DO NOT WRITE IN THIS SPACE



01132006No Chg-LLC CR2E083 (11/05)

| | |
|---|--------------------------------|
| 4. FEI Number 65-1024753 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

HEFFERMAN, RICHARD L
 2911 E MAIN ST
 PAHOKEE, FL 33476

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRES ATALLA, MAISAR O 212 L LOPEZ STREET CLEWISTON, FL 33440 |
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #