2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000013381

1. Entity Name
ANGELS UNIQUE, LLC.

Principal Place of Business	Mailing Address
13520 17TH STREET DADE CITY, FL 33525	13520 17TH STREET DADE CITY, FL 33525

01092006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3680091
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PERGERSON, TERRY WAYNE
37738 BOUGAINVILLEA AVENUE
DADE CITY, FL 33525

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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 Karen Pergerson Terry Pergerson 1/9/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	D
NAME	PERGERSON, TERRY W
STREET ADDRESS	37738 BOUGAINVILLEA AVENUE
CITY-ST-ZIP	DADE CITY, FL 33525
TITLE	AD
NAME	PERGERSON, KAREN W
STREET ADDRESS	37738 BOUGAINVILLEA AVENUE
CITY-ST-ZIP	DADE CITY, FL 33525
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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02/24/06-80059-010 55.00

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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: Director 1/16/06
Asst Director 1/16/06 352-523-1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #