

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000006546 1. Entity Name CONGRATULATE FLORIDA, L.L.C.	
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Principal Place of Business
**5558 OSPREY ISLE LANE
ORLANDO, FL 32819 US**

Mailing Address
**5558 OSPREY ISLE LANE
ORLANDO, FL 32819 US**



04252008 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3714303	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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8. Name and Address of Current Registered Agent

**HUANG, LOUIS S
5558 OSPREY ISLE LANE
ORLANDO, FL 32819**

**DO NOT WRITE
IN THIS SPACE**

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

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

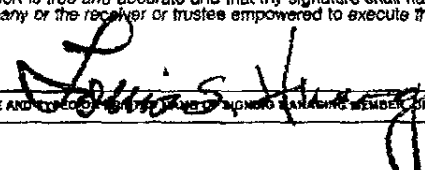
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HUANG, LOUIS S 5558 OSPREY ISLE LANE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HUANG, JESSICA C 5558 OSPREY ISLE LANE ORLANDO, FL 32819
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U00000542089
05/10/06-80085-004 50.00

**DO NOT WRITE
IN THIS SPACE**

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 TITLE OF PERSON SIGNING AS MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

4-1-06 407-238-2333
Date Daytime Phone #