2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT*# L01000008421

1. Entity Name
OLIVA-ADAMO, LLC

FILED Jan 12, 2006 08:00 AM Secretary of State

Principal Place of Business

3104 N. ARMENIA AVE. TAMPA, FL 33607 Mailing Address
PO BOX 2206
TAMPA, FL 33601



DO NOT WRITE IN THIS SPACE

01092006No Chg-LLC CR2E

CR2E083 (11/05)

4. FEI Number 59-3725883

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

OLIVA, JOHN E SR 3104 N. ARMENIA AVE. TAMPA, FL 33607

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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.

MANAGING MEMBERS/MANAGERS

(NOTE: Registered Agent signature required whon reinstaling)

DATE

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

	WALLANDELING WATCH
TITLE	MGRM
NAME	OLIVA, JOHN E SR
STREET ADDRESS	3104 N. ARMENIA AVE.
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	MGRM
NAME	OLIVA, ANGEL JR
STREET ADDRESS	3104 N. ARMENIA AVE.
CITY-ST-ZIP	TAMPA, FL 33607
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	

01/17/06-80004-011 50.0p

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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:

1/9/06 (813)248-490