


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

9/15/2006-90009-001-\$150.00-\$150.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS


06 SEP 14 AM 9:07

DOCUMENT # L01000012394 1. Entity Name 3 A ENTERPRISES, LLC	
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Principal Place of Business 8257 CAUSEWAY BOULEVARD TAMPA, FL 33619	Mailing Address 8257 CAUSEWAY BOULEVARD TAMPA, FL 33619
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DO NOT WRITE IN THIS SPACE

40104305



07052006 No Chg-LLC CR2E083 (11/05)

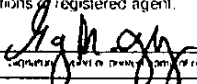
4. FCI Number 30-0178197	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SUNDIN, GLENN T
335 SOUTH PLUMOSA STREET, SUITE A
MERRITT ISLAND, FL 32952

**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  DATE 9/16/06

(Signature of Registered Agent required when applicable) (Date of Registered Agent signature required when applicable)

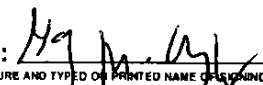
**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P ANZULEWICZ, GARY M 8257 CAUSEWAY BOULEVARD TAMPA, FL 33619
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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:  DATE 10/11/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE