

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013562

FILED
Mar 08, 2006
Secretary of State

Entity Name: THANKS AND KEPPI ENTERPRISES, LLC

Current Principal Place of Business:

5372 NORTHWEST 89TH AVENUE
SUNRISE, FL 33351 US

New Principal Place of Business:

1430 JUNEAU WAY
GRAYSON, GA 30017 US

Current Mailing Address:

5372 NW 89TH AVERAGE
SUNRISE, FL 33351

New Mailing Address:

1430 JUNEAU WAY
GRAYSON, GA 30017

FEI Number: 65-1130391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MYERS, DEBRA A.H.
5372 NW 89 AVE
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

MYERS, DEBRA A.H.
1430 JUNEAU WAY
GRAYSON, FL 30017 US

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.

SIGNATURE:

03/08/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MYERS, DEBRA
Address: 5372 NW 89 AVE
City-St-Zip: SUNRISE, FL 33351

Title: MGRM () Delete
Name: MYERS, THANKS STEPHEN
Address: 5372 NW 89 AVE
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MYERS, DEBRA
Address: 1430 JUNEAU WAY
City-St-Zip: GRAYSON, GA 30017

Title: MGRM (X) Change () Addition
Name: MYERS, THANKS STEPHEN
Address: 1430 JUNEAU WAY
City-St-Zip: GRAYSON, GA 30017

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEPHEN MYERS

MR.

03/08/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date