2006 LIMITED LIABILITY COMPANY

FILED Anr 14. 2006 08:00 A ate

	ANNUAL	. REPORT	- <u>-</u>	Apr	14, 2000 08:0
DOCU	MENT # L0200000	393		5	ecretary of St
1. Entity Name FARM & PET OUTLET, LLC					
PARIVICE	PETOUTLET, LLC				
	(8)	44-P 4-F	WHI IT	·	
Principal Plac 210 AVENUE		Mailing Address 210 AVENUE C			
GENEVA, FL		GENEVA, FL 32732			
	<u>-</u>				
DO NOT WRITE IN THIS SPACE			· • • =	04042006No Chg-LLC	CR2E083 (11/05)
			4CE	4. FEI Number 94-3141174	Applied For Not Applicable
				5. Certificate of Status Desired	\$5.00 Additional Fee Required
	6. Name and Address of Current	Registered Agent			- ·
RABAH, ALI				DO NOT W	SITE
210 AVEN GENEVA,				m. *	Average and the second
-				IN THIS SP	ACE TE
				A CONTRACTOR OF THE PROPERTY O	न वर्ग केल्क्टक्कोन १९१५ <u>१९५५ १ ज</u>
	named entity submits this statement folions of registered agent.	or the purpose of changing its regis	stered office or register	red agent, or both, in the State of Flori	da. 1 am familiar with, and accept
SIGNATURE.		DATE D			DATE
	Signature, typed or printed name of registered agent	and that it applies with the first it was	stered Agent signature required	S Minut : en included	unie
Filing Fee is \$50.00 Due by May 1, 2006				Uri000503570 04/38/06-06048-040-50-50	
9.	MANAGING MEMB	ERS/MANAGERS			onder our gernie, se
TITLE NAME	MGR RABAH, ALI			,	. •
STREET ADDRESS	210 AVENUE C				•
CITY-ST-ZIP	GENEVA, FL 32732	-			· .
NAME				4.5 v.	وه از کافی این این از میداد به بیشهای در این
STREET ADDRESS City-St-Zip				, •	And the second of the second o
BTLE				*	
NAME			1		
STREET ADDRESS CITY-ST-ZIP				DO NOT W	RITE
TITLE				IN THIS SP	ACE
NAME				IN THIS SE	MOL
STREET ADDRESS CITY+ST+ZIP					ره مصد ۳ کورنید کارید رسود در دوری
TITLE					
NAME ETRECT ADDRESS					• .
STREET ADDRESS CITY-ST-ZIP					_
TITLE					
NAME					
STREET ADDRESS CITY-ST-ZIP					
11. I hereby	certify that the information supplied wi	th this filing does not qualify for the	exemptions containe	d in Chapter 119, Florida Statutes. I	further certify that the information
indicated limited lia	on this report is true and accurate an ability company or the receiver or trust	u max my signature shall have the se empowered to execute this rep	same legal effect as i ort as required by Cha	ii mage unger oath; that I am a mana apter 608, Florida Statutes.	aying member or manager of the

4073688485 6/01 SIGNATURE: 4. 1 LALA
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #