

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011108

Entity Name: AHG ENVIRONMENTAL, LLC

FILED  
Apr 26, 2005  
Secretary of State

**Current Principal Place of Business:**

605 NW 53 AVENUE, SUITE A-17  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 204  
GAINESVILLE, FL 32602

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OYMAYAN, AVO J  
605 NW 53 AVENUE, SUITE A-16  
GAINESVILLE, FL 32609    US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title:                      P                      ( ) Delete  
Name:                      OYMAYAN, AVO J  
Address:                      605 NW 53 AVENUE, SUITE A-16  
City-St-Zip:                      GAINESVILLE, FL 32609

**ADDITIONS/CHANGES:**

Title:                      MGRM                      (X) Change ( ) Addition  
Name:                      OYMAYAN, AVO J  
Address:                      605 NW 53 AVENUE, SUITE A-16  
City-St-Zip:                      GAINESVILLE, FL 32609

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AVO OYMAYAN

MGRM

04/26/2005

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