2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Nov 13, 2006
Secretary of State

DOCUMENT# L02000026864

Entity Name: R.J.'S LUCKY 7, LLC

Current Principal Place of Business:

24950 W. NEWBERRY RD.
PO BOX 1115
NEWBERRY, FL 32669

New Principal Place of Business:

24950 W. NEWBERRY RD.
NEWBERRY, FL 32669

Current Mailing Address:

24950 W. NEWBERRY RD.
PO BOX 1115
NEWBERRY, FL 32669

New Mailing Address:

24950 W. NEWBERRY RD.
NEWBERRY, FL 32669

FEI Number: 57-1142333 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALDES, ROBERT W JR.
24950 W. NEWBERRY RD.
PO BOX 1115
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

VALDES, ROBERT W JR.
24950 W. NEWBERRY RD.
NEWBERRY, FL 32669 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: _____ 11/13/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: VALDES, ROBERT W JR
Address: 5109 SE 60 AV
City-St-Zip: TRENTON, FL 32693

Title: MGRM (X) Delete
Name: VALDES, KIM M
Address: 5109 SE 60 AV
City-St-Zip: TRENTON, FL 32693

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: VALDES, ROBERT W JR
Address: 24950 W NEWBERRY RD
City-St-Zip: NEWBERRY, FL 32669

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROBERT W VALDES JR MGRM 11/13/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date