2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jan 23, 2006 08:00 AM **DOCUMENT # L03000001564** Secretary of State MONT-MIL, LLC Principal Place of Business Mailing Address C/O GREENTREE GARDENS 4113 HENDERSON BOULEVARD C/O CREENTREE GARDENS 4113 HENDERSON BOULEVARD TAMPA, FL 33629 TAMPA, FL 33629 01082006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3763508 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CFRA, LLC DO NOT WRITE CORPORATE CENTER THREE AT INT'L PLAZA 4221 W. BOY SCOUT BLVD, 10TH FLOOR IN THIS SPACE TAMPA, FL 33607-5736 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. Signature, typed or printed name of registered agent and into it applicable (NOTE: Registered Agent signature required when rematating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS MGRM 717) E NAME MONTANARO, ANGELO C STITLET ADDRESS 4113 HENDERSON BLVD CATY-ST-ZIP TAMPA, FL 33637 01/31/06-20017-014 50.00 mir STREET ADDRESS C117-S7-21P TSTSE NAME STREET ADDITESS DO NOT WRITE CITY-ST-ZIP THLE IN THIS SPACE NAME: STREET ADDRESS City-St-ZiP NAME STREET ADORESS CITY-ST-ZIP HISLE NAME STREET ADDRESS

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 it made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee expowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 6

ANGELO C. MONTANARO

FILED