

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 23, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90140 005 \*\*\*\*50.00

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<b>DOCUMENT # L03000006463</b> 1. Entity Name <b>ACCESS ENTERPRISES, LLC</b>					
Principal Place of Business <b>9196 S.E. RIVER TERRACE TEQUESTA, FL 33469</b>			Mailing Address <b>9196 S.E. RIVER TERRACE TEQUESTA, FL 33469</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>BANISTER, JOHN R ESQ. 1555 PALM BEACH LAKES BLVD., STE. 1000 WEST PALM BEACH, FL 33401</b>			7. Name and Address of New Registered Agent Name <b>Michael Glass</b> Street Address (P.O. Box Number is Not Acceptable) <b>9196 S.E. River Terrace</b> City <b>Tequesta</b> FL Zip Code <b>33469</b>		
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 <u><i>Michael Glass</i></u> DATE <u>1/18/2006</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM GLASS, MICHAEL 9196 S.E. RIVER TERRACE TEQUESTA, FL 33469</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 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.					
<b>SIGNATURE:</b> <u><i>Michael Glass</i></u> <i>managing member</i>			<u>1/18/06</u> <i>(561) 575-5822</i>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		