2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007862

Entity Name: MICRO-REMEDIATION, L.L.C.

5512 OLD OCEAN DRIVE

OCEAN RIDGE, FL 33435

NORTH, JOSEPH C COO

WELLINGTON, FL 33414

() Delete

1832 DRESSAGE CT., APT. #832

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1935 N.W. 18TH STREET POMPANO BEACH, FL 33069 **Current Mailing Address: New Mailing Address:** 1935 N.W. 18TH STREET POMPANO BEACH, FL 33069 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: M & W AGENTS, INC 2101 CORPORATE BLVD STE. 107 BOCA RATON, FL 33431 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MURPHY, CYNTHIA S CFO Name: Name: 9568 BARLETTA WINDS PT. Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SEEGER, SHANNON E T Name: Name: Address: 1034 NW 121 LANE Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SEEGER, KENNETH V P Name: Name: Address: 1034 NW 121 LANE Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: Title: MGRM Title: () Change () Addition () Delete Name: SENOMA, INC. Name: 1935 NW 18TH STREET Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MAY, JONATHAN CEO Name: Name:

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

MGRM

NORTH, JOSEPH C COO

10329 MEDICIS PLACE

WELLINGTON, FL 33467

(X) Change () Addition

SIGNATURE: CYNTHIA MURPHY CFO 04/26/2005