2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# L03000017189

Entity Name: JOE PETER, L.L.C

Current Principal Place of Business:

25002 E. COLONIAL DR
CHRISTMAS, FL 32709 US

New Principal Place of Business:

Current Mailing Address:

25002 E. COLONIAL DR
CHRISTMAS, FL 32709 US

New Mailing Address:

FEI Number: 75-3114920 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AWAD, ALICE I
25002 E. COLONIAL DRIVE
CHRISTMAS, FL 32709 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/MANAGERS:

Title: MGR ( ) Delete
Name: AWAD, ALICE I
Address: 25002 E. COLONIAL DR
City-St-Zip: CHRISTMAS, FL 32709 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: ASST ( ) Change (X) Addition
Name: AWAD, JOSEPH N ASST
Address: 25002 E. COLONIAL DR
City-St-Zip: CHRISTMAS, FL 32709

Title: ASST ( ) Change (X) Addition
Name: AWAD, JEANNETTE N ASST
Address: 25002 E. COLONIAL DR
City-St-Zip: CHRISTMAS, FL 32709

Title: ASST ( ) Change (X) Addition
Name: AWAD, PETER N ASST
Address: 25002 E. COLONIAL DR
City-St-Zip: CHRISTMAS, FL 32709

Title: ASST ( ) Change (X) Addition
Name: DAMYAN, CHRISTINA N ASST
Address: 25002 E. COLONIAL DR
City-St-Zip: CHRISTMAS, FL 32709

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: ALICE AWAD MGR 04/30/2006

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