

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021804

Entity Name: A A N ENTERPRISES LLC

FILED
Apr 06, 2006
Secretary of State

Current Principal Place of Business:

794 S. TAMPA AVE
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

1495 SHELTER ROCK RD
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 20-0046313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AZIZ, ABDUL
1495 SHELTER ROCK RD
ORLANDO, FL 32835 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: AZIZ, ABDUL
Address: 1495 SHELTER ROCK RD
City-St-Zip: ORLANDO, FL 32835 US

Title: MGR () Delete
Name: PATEL, AZIZ
Address: 406 LATONIA ST
City-St-Zip: KISSIMMEE, FL 34741

Title: MGR () Delete
Name: PIRANI, NOORARI
Address: 9457 PALM TREE DR.
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: PATEL, AZIZ
Address: 13862 AMELIA POND
City-St-Zip: WINDERMERE, FL 34786

Title: MGR (X) Change () Addition
Name: PATEL, NASRIN
Address: 13862 AMELIA POND
City-St-Zip: WINDERMERE, FL 34786

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: ABDUL AZIZ

MGRM

04/06/2006

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