

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024494

FILED
Jan 10, 2006
Secretary of State

Entity Name: FULFILLMENT CENTER, L.L.C.

Current Principal Place of Business:

9102 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836

New Principal Place of Business:

Current Mailing Address:

9102 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 56-2375954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEMANI, NIZAR (NICK)
9102 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836 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: MGRM () Delete
Name: HEMANI, NASIRUDDIN
Address: 10939 WOODCHASE CIRCLE
City-St-Zip: ORLANDO, FL 32836

Title: MGRM () Delete
Name: HEMANI, MOHAMMED
Address: 18250 KESTREL COURT
City-St-Zip: BROOKFIELD, WI 53045

Title: MGRM () Delete
Name: HEMANI, NIZAR
Address: 5525 OXFORD MOOR
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: HEMANI, NIZAR (NICK)
Address: 9102 SOUTHERN BREEZE DRIVE
City-St-Zip: ORLANDO, FL 32836

Title: MGRM () Delete
Name: HEMANI, ALTAF
Address: 914 ELMDALE ROAD
City-St-Zip: GLENVIEW, IL 60025

ADDITIONS/CHANGES:

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

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

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

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

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

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: NIZAR HEMANI

MGRM

01/10/2006

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