

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90161 022 ****50.00

0000000000 L03000033415 1. Entity Name COASTAL CARPET & TILE CLEANING L.L.C.	
--	---

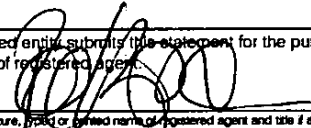
Principal Place of Business 1485 RUNNING OAK LANE WEST PALM BEACH, FL 33411	Mailing Address 1485 RUNNING OAK LANE WEST PALM BEACH, FL 33411
---	---

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 75-3126593	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00	

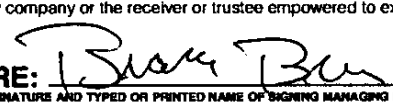
6. Name and Address of Current Registered Agent BRESCIA, ROCIO 1485 RUNNING OAK LANE WEST PALM BEACH, FL 33411

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	FL Zip Code
---	-------------

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  DATE 3-13-05

Filing Fee is \$50.00 Due by May 1, 2005	Make check payable to Florida Department of State
---	--

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
☐ MGR ☐ BRESCIA, BRANDON ☐ 1485 RUNNING OAK LANE ☐ ROYAL PALM BEACH, FL 33411	☐	☐ ☐	
☐ MGR ☐ BRESCIA, ROCIO ☐ 1485 RUNNING OAK LANE ☐ ROYAL PALM BEACH, FL 33411	☒	☐ ☐	
☐ ☐ ☐ ☐	☐	☐ ☐	
☐ ☐ ☐ ☐	☐	☐ ☐	
☐ ☐ ☐ ☐	☐	☐ ☐	
☐ ☐ ☐ ☐	☐	☐ ☐	

11. I hereby certify that the information supplied with this filing does not qualify 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 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:  3/13/05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #