

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000033983

**FILED**  
**Mar 14, 2006**  
**Secretary of State**

**Entity Name:** THE REMEDY LLC

**Current Principal Place of Business:**

5714 S.E. HORSESHOE POINT ROAD  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

5714 S.E. HORSESHOE POINT ROAD  
STUART, FL 34997

**New Mailing Address:**

**FEI Number:** 65-1203428

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

CAFIERO, JOHN J MNGR  
5714 SE HORSESHOE PT RD  
STUART, FL 34997 US

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: JOHN J CAFIERO

03/14/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CAFIERO, JOHN J  
Address: 5714 S.E. HORSESHOE POINT ROAD  
City-St-Zip: STUART, FL 34997

**ADDITIONS/CHANGES:**

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: JOHN J CAFIERO

MNGR

03/14/2006

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