

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000038318

1. Entity Name
L B & B ENTERPRISES, LLC



Principal Place of Business
**4616 S. WOODLYN DRIVE
TAMPA, FL 33611**

Mailing Address
**4616 S. WOODLYN DRIVE
TAMPA, FL 33611**

DO NOT WRITE IN THIS SPACE



02282006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
42-1609962

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KTG&S REGISTERED AGENT CORPORATION
10 S.E. 2ND STREET, 28TH FLOOR
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

000000436208
04/22/06-80004-019 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURGSTINER, J. DAVID 4616 S. WOODLYN DRIVE TAMPA, FL 33611
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/4/06 8B-766-91