

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040874

**FILED**  
**Mar 09, 2006**  
**Secretary of State**

**Entity Name:** ABOVE & BEYOND INTERNATIONAL ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

5821 W. COLONIAL DRIVE  
SUITE B  
ORLANDO, FL 32818

**New Principal Place of Business:**

420 NORTH KIRKMAN ROAD  
SUITE B  
ORLANDO, FL 32811

**Current Mailing Address:**

PO BOX 617455  
ORLANDO, FL 32861

**New Mailing Address:**

**FEI Number:** 52-2403691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RILEY, SHARON  
1896 GAMMON LANE  
ORLANDO, FL 32811 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: GREEN, CHERYL  
Address: 4070 SHANNON BROWN DR  
City-St-Zip: ORLANDO, FL 32808

Title: MGRM ( ) Delete  
Name: WASHINGTON, PORTIA  
Address: 701 WILLOW AVENUE  
City-St-Zip: SANFORD, FL 32773

Title: MGRM (X) Delete  
Name: RILEY, SHARON  
Address: 1896 GAMMON LANE  
City-St-Zip: ORLANDO, FL 32811

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: RILEY, SHARON Y  
Address: 1896 GAMMON LANE  
City-St-Zip: ORLANDO, FL 32811

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: SHARON Y. RILEY

MGRM

03/09/2006

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