


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000043970 1. Entity Name VO ENTERPRISES I, LLC |  |
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| Principal Place of Business 4729 HIGHLANDS PLACE CIRCLE LAKELAND, FL 33813 US | Mailing Address P O BOX 7891 LAKELAND, FL 33807 US |
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05012006 No Chg-LLC

CR2E083 (11/05)

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| 4. FEI Number 20-0421696 | Applied For Not Applicable |
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|---|--|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent LY, PHUONG A 4729 HIGHLANDS PLACE CIR LAKELAND, FL 33813 |
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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 *Phuong A Ly - President* DATE 4/30/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM VO, PHUC 4729 HIGHLANDS PLACE CIRCLE LAKELAND, FL 33813 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM LY, PHUONG 4729 HIGHLANDS PLACE CIRCLE LAKELAND, FL 33813 |
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05/19/06-80044-018 50.00

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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: *Phuong A Ly*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #