

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044611

FILED  
Apr 16, 2006  
Secretary of State

Entity Name: LAURA REYES "LC"

**Current Principal Place of Business:**

7708 JENNER AVE  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1894  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

FEI Number: 57-1194190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REYES, LAURA  
18118 US 41 NORTH LOT 60A  
LUTZ, FL 33549 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: MGR ( ) Delete  
Name: REYES, LAURA  
Address: 18118 US 41 NORTH LOT 60A  
City-St-Zip: LUTZ, FL 33549

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Change (X) Addition  
Name: NEBB, JAMI  
Address: PO1894  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: MGRM ( ) Change (X) Addition  
Name: FOX, DON  
Address: PO 1894  
City-St-Zip: TARPON SPRINGS, FL 34688

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: LAURA REYES

MGR

04/16/2006

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