

**2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Dec 06, 2006  
Secretary of State**

DOCUMENT# L03000047797

Entity Name: AMERICAN BUILDING ALLIANCE LLC

**Current Principal Place of Business:**

13200 SW 128 STREET  
A-2  
MIAMI, FL 33186 US

**New Principal Place of Business:**

14841 SW 148 AVE  
MIAMI, FL 33196 US

**Current Mailing Address:**

13200 SW 128 STREET  
A-2  
MIAMI, FL 33186 US

**New Mailing Address:**

14841 SW 148 AVE  
MIAMI, FL 33196 US

FEI Number: 20-0666324      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CONERN ENTERPRISES LLC  
14841 SW 148TH AVE  
MIAMI, FL 33196 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: CONERN ENTERPRISES L, LC  
Address: 14841 SW 148TH AVE  
City-St-Zip: MIAMI, FL 33196 US

Title: MGRM (X) Delete  
Name: UNLIMITED PROJECT LL, C  
Address: 16449 SW 95 STREET  
City-St-Zip: MIAMI, FL 33196 US

**ADDITIONS/CHANGES:**

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

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: OSCAR ERNAND

MGRM

12/06/2006

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