2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000049671

1. Entity Name
BILLY BOTELHO REMOLDING CONTRACTOR L.L.C.



FILED Feb 15, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

8433 78TH TERR N SEMINOLE, FL 33777 8433 78TH TERR N SEMINOLE, FL 33777



02032008 No Chg-LLC

CR2E083 (11/05)

4. FEt Number 02-3429326 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOTELHO, BILLY 8433 78TH TERR N SEMINOLE, FL 33777

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	named emily submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and the Aspeticable	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2008	•	
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET AUDITESS CATY-ST-ZIP	MGR BOTELHO, BILLY 8433 78TH TERR N SEMINOLE, FL 33777		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
DITLE NAME STREET ADDRESS CITY-ST-ZRP		DO	NOT WRITE
TIPLE NAME SITTET ADDRESS CITY-ST-ZIP		IN .	THIS SPACE
TITLE HAME STREET ADDRESS GTTY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 path; 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.			

ITED NAME OF SIGHING MANAGING MEMBER, OR ALTHORIZED REPRESENTATIVE