### 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L03000055406

1. Entity Name
THE FINISHING TOUCH "L.L.C."



FILED Sep 08, 2006 08:00 AN Secretary of State

Principal Place of Business 2825 MORNINGSIDE DR. TALLAHASSEE, FL 32301 Mailing Address

2825 MORNINGSIDE DR. TALLAHASSEE, FL 32301



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07062006No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 32-0102095 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCBRIDE, MIKE 2825 MORNINGSIDE DR. TALLAHASSEE, FL 32301

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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent aigniture required when reinstating)	DATE	
SIGNATURI				_
	ve named entity submits this statement for the purpose of chan ations of registered agent.	ging its registered office or registered agent, or bo	oth, in the State of Florida. I am fa	miliar with, and accept

#### Filing Fee is \$50.00 Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCBRIDE, MIKE 2825 MORNINGSIDE DR. TALLAHASSEE, FL 32301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY+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 ex		

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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: Mike ME Guill

8-12-06

Date

Daytime Phone #