## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000057131

Entity Name: GOEBELS CYRIAQUE ENTERPRISES, LLC

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

172 VAN BUREN AVE LAKE MARY, FL 32746 US

Current Mailing Address: New Mailing Address:

P.O.BOX 550029 P.O.BOX 952706

ORLANDO, FL 32855 US LAKE MARY, FL 32795 US

FEI Number: 20-0577728 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CYRIAQUE, GOEBELS J 172 VAN BUREN AVE LAKE MARY, FL 32746 US

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:
 CYRIAQUE, GOEBELS J

 Address:
 172 VAN BUREN AVE

 City-St-Zip:
 LAKE MARY, FL 32746 US

Title: MGRM () Delete
Name: CYRIAQUE, JUNA CAPY
Address: 172 VAN BUREN AVE
City-St-Zip: LAKE MARY, FL 32746 US

 Title:
 MGRM
 ( ) Delete

 Name:
 MORISSET, WILENSKY

 Address:
 2638 BREEZWIND DR.

 City-St-Zip:
 ORLANDO, FL 32839

 Title:
 MGRM
 (X) Delete

 Name:
 CYRIAQUE, KERWIN J

 Address:
 172 VAN BUREN AVE

 City-St-Zip:
 LAKE MARY, FL 32746

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CYRIAQUE, GOEBELS J OWNER

Address: 172 VAN BUREN AVE City-St-Zip: LAKE MARY, FL 32746 US

Title: MGRM (X) Change ( ) Addition Name: CYRIAQUE, JUNA CAPY MEMBER Address: 172 VAN BUREN AVE

Address: 1/2 VAN BUREN AVE
City-St-Zip: LAKE MARY, FL 32746 US

Title: MEMB (X) Change ( ) Addition Name: CYRIAQUE, KERWIN J MEMBER Address: 172 VAN BUREN AVE

City-St-Zip: LAKE MARY, FL 32746

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: GOEBELS J CYRIAQUE MGR 01/06/2006