2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

1. Entity Nan	MENT # L0400000543		Jan 31, 2006 08:00 AM Secretary of State				
RO1 ZW	EENES FAINTING CONTRACT	On, L.L.C.					
Principal Plac	ce of Business	Mailing Address	······································				
14735 ELMONT AVENUE SPRING HILL FL 34610		14735 ELMONT AVENUE SPRING HILL FL 34610					
2. Principal Place of Business		3. Mailing Address		עבר נותב נותום ווסב נום נובנותכו ו	1) BB/() BB/() BB/()	IN NUU DINGE IL	18 E (((18 E)
Suite, Apt. II, etc.		Suite, Apt. #, etc.		1st MOORE	CR2E083	(10/05)	
City & State		City & State		4. FEI Number 86-109410	14	1	plied Fo
Zìp	Country	Zip	Country	5. Certificate of Status Desired		5.00 Add	litional
	6. Name and Address of Current Ri	egistered Agent	.1	7. Name and Address of New	Registered Ag	pent	
TWEEDED DOW !			Name				
147	EERES, ROY J 35 ELMONT AVENUE RING HILL FL 34610		Street Address	(P.O. Box Number is Not Acceptab	te)	· · · · · · · · · · · · · · · · · · ·	-
			City		FL	Zrp Code	
	e named entity submits this statement for titions of registered agent.	he purpose of changing its	s registered office or registe	red agent, or both, in the State of F	lorida. I am fa	nihar with,	and acc
SIGNATURE	Signature, typed or printed name of registered agent and		IE. Regisimed Agent signature require		- DATE	·	
	Ong actions, typical or position brains a consistent against the	FILE N Make Check Payab	OWIII FEE IS \$50.00 ble to Florida Departme te By May 1, 2006	The Children was	- 72		
9.	MANAGING MEMBERS		10.	ADDITIONS	CHANGES	-	
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ZWEERES, ROY J 14735 ELMONT AVENUE SPRING HILL FL 34610	☐ Delele	UILE NAME STREEL AODRESS CUTY-S1-2IP	80000041 02/09/06-80	しじざるひ	□ Change 50.00	Adi:
NAME STREET ADDRESS CITY-ST-IP	MGRM ZWEERES, ROY B 14735 ELMONT AVENUE SPRING HILL FL 34610	☐ Delete	THRE MAME STREET ADDRESS CITY-ST-ZIP		!	Change	□ Add
TITLE NAME STREET ADDRESS EITY-ST-ZIP		□ Oelete	TITLE MAME STREET ADDRESS CATY-ST-ZEY			Change	□ Act
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TIVLE NAME STREET ADDRESS CITY-SI-ZIP	,	į	Change	□Æ
TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-21P		}	Change	□ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TIFLE NAME STRICE I ADUNESS CITY-ST-ZIP	and in Section 119 Florida Statutes		Change	□ A-3

FILED

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 till limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Roy & Zweenes ROY & ZWEFRES JAN 27-2006 727-856-17