2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State **DOCUMENT # L04000004066** 03-15-2005 90350 016 ****55.00 1. Entity Name AAA EQUIPMENT SUPPLY, LLC Principal Place of Business Mailing Address 3825 BADEN DRIVE 3825 BADEN DRIVE 20021085 HOLIDAY, FL 34691 HOLIDAY, FL 34691 2. Principa Place of Business 2801 BALKS DOLE CT valling Address POI BacksDale CT 02172005 Chg-LLC CR2E083 (10/03) Applied For OLIDAY Not Applicable 123C0 \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARNS, DAVID R 3825 BADEN DRIVE HOLIDAY, FL 34691 8. 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. I am familiar with, and accept the obligations of registered agent. ed agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. PRESIDENT/OWNER TITLE TITLE Change Addition NAME HARNS, DAVID R NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ACCIDES CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7tP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

Mar 15, 2005 8:00 am

AAA Equipment Supply, LLC

20071085

2801 Barksdale Ct Holiday, Florida. 34691

March 8, 2005

Division of Corporations P.O. Box 6327 Tallahassee, Florida. 32314

Dear Sir or Madam:

This letter is to confirm our address change.

Previous Address

3825 Baden Drive

Holiday Florida, 34691

NEW ADDRESS

2801 BARKSDALE CT.

HOLIDAY FLORIDA, 34691

Document Number L04000004066

Sincerely,

David R. Harns
President/Owner

AAA Equipment Supply, LLC

TOR DAVID R. HARRYS, PASCO, FLORIDA.
3-9-05
Watour A Smith.

