

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 11, 2006  
Secretary of State**

DOCUMENT# L04000004329

Entity Name: MYKHAYLO FARYNA, LLC

**Current Principal Place of Business:**

4419 HAMWOOD ST.  
NORTH PORT, FL 34287

**New Principal Place of Business:**

**Current Mailing Address:**

4419 HAMWOOD ST.  
NORTH PORT, FL 34287

**New Mailing Address:**

FEI Number: 76-8142471      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FARYNA, MYKHAYLO  
4419 HAMWOOD ST.  
NORTH PORT, FL 34287      US

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

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: FARYNA, MYKHAYLO  
Address: 4419 HAMWOOD ST.  
City-St-Zip: NORTH PORT, FL 34287

**ADDITIONS/CHANGES:**

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: MYKHAYLO FARYNA      MGR      01/11/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date