2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

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

FILED DOCUMENT # L04000657980 May 01, 2006 08:00 AN Secretary of State H & D MAINTENENCE SERVICE, LLC Principal Place of Business Mailing Address 3612 DALEFORD RD 3612 DALEFORD RD ORLANDO, FL 32808 ORLANDO, FL 32808 04282006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 06-1706565 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RIVERA, HECTOR M DO NOT WRITE 3612 DALEFORD RD ORLANDO, FL 32808 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGRM TOTLE NAME RIVERA, HECTOR M 3612 DALEFORD RD STREET ADDRESS ORLANDO, FL 32808 C/TY-ST-7IP U00000551683. 05/13/06-80111-007 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-\$T-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIF 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 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.

4-28-06

Daytime Phone if