

**2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L04000007403

**FILED**  
**May 16, 2006**  
**Secretary of State****Entity Name:** R & E INTERIORS LLC**Current Principal Place of Business:**16855 70TH STREET NORTH  
LOXAHATCHEE, FL 33470**New Principal Place of Business:****Current Mailing Address:**16855 70TH STREET NORTH  
LOXAHATCHEE, FL 33470**New Mailing Address:****FEI Number:** 20-0652159**FEI Number Applied For** ( )**FEI Number Not Applicable** ( )**Certificate of Status Desired** (X)**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD. #221E  
PALM BEACH GARDENS, FL 33410 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:** GRIFFIS, WILLIAM R  
**Address:** 16855 70TH STREET NORTH  
**City-St-Zip:** LOXAHATCHEE, FL 33470**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** V.P. ( ) Change (X) Addition  
**Name:** CARAMES, SHAWN D V.P.  
**Address:** 16855 70TH STREET NORTH  
**City-St-Zip:** LOXAHATCHEE, FL 33470 US

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: WILLIAM R. GRIFFIS

MGR

05/16/2006

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