

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016573

FILED
Feb 02, 2006
Secretary of State

Entity Name: SHOLAKUNMI SERVICES "LC"

Current Principal Place of Business:

20106 N.W 51 CT
MIAMI, FL 33055

New Principal Place of Business:

20106 N.W 51 CT
OPALOCKA, FL 33055

Current Mailing Address:

20106 N.W 51 CT
MIAMI, FL 33055

New Mailing Address:

FEI Number: 36-4550127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADEKUNLE, SHOLAKUNMI A
20106 N.W 51 CT
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

ADEKUNLE, SHOLAKUNMI A
20106 N.W 51 CT
OPALOCKA, FL 33055 US

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:

02/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ADEKUNLE, SHOLAKUNMI A
Address: 20106 N.W 51 CT
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ADEKUNLE, SHOLAKUNMI A
Address: 20106 N.W 51 CT
City-St-Zip: OPALOCKA, FL 33055

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: SAADEKUNLE

MS.

02/02/2006

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