

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031444

Entity Name: EVIL EXCRUSION LLC

FILED
Apr 09, 2005
Secretary of State

Current Principal Place of Business:

955 MARION STREET
CASSADAGA, FL 32706 US

New Principal Place of Business:

931 SPRINGBANK AVE
ORANGE CITY, FL 32763 US

Current Mailing Address:

P. O. BOX 174
CASSADAGA, FL 32706 US

New Mailing Address:

931 SPRINGBANK AVE
ORANGE CITY, FL 32763 US

FEI Number: 27-0088011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIMPAR, SASHA A
955 MARION STREET
CASSADAGA, FL 32706 US

Name and Address of New Registered Agent:

LIMPAR, SASHA A
931 SPRINGBANK AVE
ORANGE CITY, FL 32763 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:

04/09/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LIMPAR, SASHA A
Address: 955 MARION ST
City-St-Zip: CASSADAGA, FL 32706

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LIMPAR, SASHA A
Address: 931 SPRINGBANK AVE
City-St-Zip: ORANGE CITY, FL 32763

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SASHA LIMPAR

MGR

04/09/2005

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