

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046034

FILED
Jul 19, 2006
Secretary of State

Entity Name: MILAGROS AND PETER DECHAT, LLC

Current Principal Place of Business:

109 BRISTOL FOREST TRAIL
SANFORD, FL 32771

New Principal Place of Business:

354 WILLOWBAY RIDGE ST.
SANFORD, FL 32771

Current Mailing Address:

109 BRISTOL FOREST TRAIL
SANFORD, FL 32771

New Mailing Address:

354 WILLOWBAY RIDGE ST.
SANFORD, FL 32771

FEI Number: 86-1109798 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DECHAT, PETER
109 BRISTOL FOREST TRAIL
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

DECHAT, MILAGROS R OWNER
354 WILLOWBAY RIDGE ST.
SANFORD, FL 32771 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: MILAGROS R. DECHAT

07/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DECHAT, PETER
Address: 109 BRISTOL FOREST TRAIL
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES:

Title: OWNE (X) Change () Addition
Name: DECHAT, PETER A OWNER
Address: 354 WILLOWBAY RIDGE ST.
City-St-Zip: SANFORD, FL 32771

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: MILAGROS R. DECHAT

MGR

07/19/2006

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