

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050502

FILED
Apr 10, 2006
Secretary of State

Entity Name: REVIVE CONSULTING, LLC

Current Principal Place of Business:

5722 S. FLAMINGO RD.,
#185
COOPER CITY, FL 333303206

New Principal Place of Business:

11123 TOPEKA PLACE
COOPER CITY, FL 33026

Current Mailing Address:

5722 S. FLAMINGO RD.,
#185
COOPER CITY, FL 333303206

New Mailing Address:

11123 TOPEKA PLACE
COOPER CITY, FL 33026

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALLA, MELINDA
5722 S. FLAMINGO RD.,
#185
COOPER CITY, FL 333303206 US

Name and Address of New Registered Agent:

MCCALLA, MELINDA
11123 TOPEKA PLACE
COOPER CITY, FL 33026 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: _____ 04/10/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCALLA, MELINDA
Address: 5722 S. FLAMINGO RD., #185
City-St-Zip: COOPER CITY, FL 333303206

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCCALLA, MELINDA
Address: 11123 TOPEKA PLACE
City-St-Zip: COOPER CITY, FL 33026

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: MELINDA MCCALLA MGR 04/10/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date