

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052671

FILED
Apr 21, 2006
Secretary of State

Entity Name: ALL AMERICAN GRINDING EQUIPMENT, LLC

Current Principal Place of Business:

2401 PGA BLVD
248
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2401 PGA BLVD
248
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 20-1338429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLASOR, RON W
2401 PGA BLVD
SUITE 248
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: MGRM () Delete
Name: FRITZ, KENNETH
Address: 1186 N. EGLIN PKWY
City-St-Zip: SHALIMAR, FL 32579

Title: MGRM () Delete
Name: BURGESS, DONALD
Address: 5115 BRISTOL INDUSTRIAL WAY
City-St-Zip: BUFORD, GA 30518

Title: MGRM (X) Delete
Name: SLASOR, RONALD
Address: 2401 PGA BLVD, SUITE 248
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SLASOR, RONALD
Address: 2401 PGA BLVD, SUITE 248
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUSAN A. TILL

CONT

04/21/2006

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