## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055971

Entity Name: FLORIDA CONNECTIONS LLC

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1703 N. TAMPA ST. 8610 GRANDVIEW DR. 11 TAMPA, FL 33617

TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

1703 N. TAMPA ST. 8610 GRANDVIEW DR. 11 TAMPA, FL 33617

TAMPA, FL 33602

FEI Number: 76-8077622 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PADILLA, FRANKLIN
1703 N. TAMPA ST.
11
TAMPA, FL 33602 US

RAYMOND, RICHARD
8610 GRANDVIEW DR.
TAMPA, FL 33617 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: RICHARD RAYMOND 04/20/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 PADILLA, FRANKLIN
 Name:
 RAYMOND, RICHARD

 Address:
 1703 N. TAMPA ST., SUITE 11
 Address:
 8610 GRANDVIEW DR.

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:
 TAMPA, FL 33617

Title: MGRM ( ) Delete Title: MGRM ( X) Change ( ) Addition Name: PADILLA, HEATHER Name: LAMOUR, ANNE MARIE

Address: 1703 N. TAMPA ST., SUITE 11 Address: 8610 GRANDVIEW DR. City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33617

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: RICHARD RAYMOND MGR 04/20/2006