

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056277

FILED
May 01, 2006
Secretary of State

Entity Name: MICHAEL E. RODRIGUEZ, P.L.

Current Principal Place of Business:

2202 N. WEST SHORE BLVD.
SUITE 200
TAMPA, FL 33607

New Principal Place of Business:

3703 W. CORONA ST.
TAMPA, FL 33629

Current Mailing Address:

2202 N. WEST SHORE BLVD.
SUITE 200
TAMPA, FL 33607

New Mailing Address:

3703 W. CORONA ST.
TAMPA, FL 33629

FEI Number: 20-1534165 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:

RODRIGUEZ, MICHAEL E
2202 N. WEST SHORE BLVD.
SUITE 200
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

RODRIGUEZ, MICHAEL E
3703 W. CORONA ST.
TAMPA, FL 33629 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: MICHAEL E. RODRIGUEZ

05/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: RODRIGUEZ, MICHAEL E ESQUIRE
Address: 2202 N. WEST SHORE BLVD. SUITE 200
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: RODRIGUEZ, MICHAEL E ESQUIRE
Address: 3703 W. CORONA ST.
City-St-Zip: TAMPA, FL 33629

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: MICHAEL E. RODRIGUEZ, PRESIDENT

MGR

05/01/2006

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