


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 09, 2007 08:00 A
Secretary of State

DOCUMENT # L04000057236 1. Entity Name MECHANICAL CONSULTING & COATINGS, LLC	
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Principal Place of Business 8309 CEDAR GROVE CHRUCH RD PLANT CITY, FL 33567	Mailing Address 8309 CEDAR GROVE CHRUCH RD PLANT CITY, FL 33567
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05012007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 34-2008603	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
 1840 SW 22ND ST.
 4TH FLOOR
 MIAMI, FL 33145

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRS GREER, TERESA A 8309 CEDAR GROVE CHRUCH RD PLANT CITY, FL 33567
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRS GREER, JOHN W 8309 CEDAR GROVE CHRUCH RD PLANT CITY, FL 33567
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 05/29/07-80029-003 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Teresa A. Greer* 5-1-07 813-~~316~~ 4437
 813-635-5224

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #