## **~ 2006 LIMITED LIABILITY COMPANY FILED ANNUAL REPORT** May 04, 2006 08:00 Al Secretary of State DOCUMENT # L04000060556 1. Entity Name ROYAL PET CARE LLC Principal Place of Business Mailing Address 2126 HYDE PARK ST. 2126 HYDE PARK ST. SARASOTA, FL 34239 SARASOTA, FL 34239 03122006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1497494 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BERMUDEZ, CANDICE DO NOT WRITE 2126 HYDE PARK ST SARASOTA, FL 34239 IN THIS SPACE 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	BERMUDEZ, CANDICE
STREET ADDRESS	2126 HYDE PARK ST.
CITY-ST-ZIP	SARASOTA, FL 34239
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
INTE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
<del>, </del>	*** **** *****

U00000563234 05/20/06-80003-001 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida	
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	
limited liability company or the receiver or flustee empowered to execute this report as required by Chapter 608, Florida Statutes	3.

SIGNATURE;

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/166

Daytime Phone #