

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000063596

1. Entity Name
SEVEN AMIGOS, LLC



Principal Place of Business
**308 SOUTH JEFFERSON STREET
PENSACOLA, FL 32502**

Mailing Address
**308 SOUTH JEFFERSON STREET
PENSACOLA, FL 32502**

DO NOT WRITE IN THIS SPACE



04272006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1883060

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MATTHEWS, EDELS F JR.
308 SOUTH JEFFERSON STREET
PENSACOLA, FL 32502**

**DO NOT WRITE
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. I 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	MATTHEWS, EDELS F JR
STREET ADDRESS	308 SOUTH JEFFERSON STREET
CITY-ST-ZIP	PENSACOLA, FL 32502

TITLE	
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05/12/06-80017-013 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 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: _____

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

4/27/06

(850) 432-1300

Date

Daytime Phone #