2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# L04000070056

Entity Name: TACO TIRO LLC

Current Principal Place of Business:

5624 ARLINGTON ROAD
JACKSONVILLE, FL 32216

New Principal Place of Business:

5624 ARLINGTON ROAD
JACKSONVILLE, FL 32211

Current Mailing Address:

9838-288 OLD BAYMEADOWS ROAD
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-1658923 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUCKETT, TERRY
9838-288 OLD BAYMEADOWS ROAD
JACKSONVILLE, FL, FL 32256 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	LUCKETT, TERRY	
Address:	9838-288 OLD BAYMEADOWS ROAD	
City-St-Zip:	JACKSONVILLE,, FL 32256	
Title:	MGRM	( ) Delete
Name:	EARLY, TYRONE	
Address:	9838-288 OLD BAYMEADOWS ROAD	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	MGRM	( ) Delete
Name:	HOGARTY, JOHN	
Address:	9838-288 OLD BAYMEADOWS ROAD	
City-St-Zip:	JACKSONVILLE, FL 32256	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: TERRY LUCKETT MGR 04/30/2006

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