2006 LIMITED LIABILITY COMPANY

2006 LIMITED LIABILITY COMPAI ANNUAL REPORT	FILED Feb 07, 2006 8:00 am Secretary of State
DOCUMENT # #20 10000 12218 1. Entity Name 8. (): 5. (): 1 () ()	02-07-2006 90085 001 ****50.00 02-07-2006 90085 002 *****5.00
Principal Place of Business Mailing Address	?/////// 2 M
P.O. Box 807	
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DO NOT WRITE IN THIS SPACE	No Chg-LLC CR2E083 (11/05)
To her will 2 in his crac	75= 3(84.313 Not Applicable
Name and Address of Current Registered Agent	5. Certificate of Status Desired \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent	DO NOT WRITE
	IN THIS SPACE
The above named entity submits this statement for the purpose of changing its registere the obligations of registered agent.	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature-typed or printed name of registered agent and tife applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
9. MANAGING MEMBERS/MANAGERS	
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS CITY - ST- ZIP	DO NOT WRITE
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STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	
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: Soldie Ruse Ja 1/07/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	