## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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## **DOCUMENT # L04000073300**

t. Entity.Name

PAMÉLA'S CLEANING, LLC



**FILED** Apr 28, 2006 08:00 AM Secretary of State

Principal Place of Business

127 LUCA LANE

KISSIMMEE, FL 34743

Mailing Address

127 LUCA LANE

KISSIMMEE, FL 34743



04252006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 41-2154173 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and liftle if applicable

GALLAHAN, PAMELA K 127 LUCA LANE KISSIMMEE, FL 34743

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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 the obligations of registered agent. | accept |
|----|---|--------|
| Sì | SNATURE   |        |

INOTE Registered Agent argnature required when reinstating

## Filing Fee is \$50.00 Due by May 1, 2006

| 9.   | MANAGING MEMBERS/MANAGERS   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CHY-ST-ZIP  | MGR<br>GALLAHAN, PAMELA K<br>127 LUCA LANE<br>KISSIMMEE, FL 34743 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CHY-ST-ZIP  |   |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP          |   |
| NITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TIFLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   |

U00000S42096 05/10/06-80085-006 50.00

DATE

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11. I hereby certify that the information supplied with this filling 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: OR AUTHORIZED REPRESENTATIVE

Daytime Phone #