2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000075556

City-St-Zip:

FLORIDA CITY, FL 33034

Entity Name: ABOVE IT ALL SERVICES, LLC

FILED Mar 02, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
198 FARME	BROOK RD. NGE, FL 3212				
Current Mailing Address:			New Mailing Address:		
	BROOK RD. NGE, FL 3212	7			
FEI Number:	El Number: 20-1908324 FEI Number Applied For ()		FEI Number Not Applicable ()		ficate of Status Desired()
Name and Address of Current Registered Agent: Name and Address of New					egistered Agent:
	JOEL BROOK RD. NGE, FL 3212	7 US			
The above in the State		bmits this statement for the p	urpose of changing it	ts registered office o	or registered agent, or both
SIGNATUR					
	Electronic	Signature of Registered Age	nt		Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	P () E FORMAN, JOEL 198 FARMBROOI PORT ORANGE,		Title: Name: Address: City-St-Zip:	P (X) Chang MALAHOO, ANDREW 4862 WILLOW RUN W ORLANDO, FL 32808	
Title: Name: Address: City-St-Zip:	VP () C MALAHOO, ANDR 4862 WILLOW R ORLANDO, FL 3	UN WEST	Title: Name: Address: City-St-Zip:	MGR (X) Chang FORMAN, JOEL 198 FARMBROOK RD PORT ORANGE, FL 3	
Title: Name: Address: City-St-Zip:	D () E KEY, SARAH P.O BOX 901383 HOMESTEAD, FL		Title: Name: Address: City-St-Zip:	()Chang	e () Addition
Title: Name: Address: City-St-Zip:	D () E PINE, TINA 955 NE 36TH AVE HOMESTEAD, FL		Title: Name: Address: City-St-Zip:	()Chang	e ()Addition
Title: Name: Address:	MGR () D BURNS, GEORGI P.O BOX 343030		Title: Name: Address:	()Chang	e () Addition

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.

City-St-Zip:

SIGNATURE: JOEL FORMAN MR 03/02/2006