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

DOCUMENT # L04000081994

**EQUITY ENTERPRISES LLC** 

Principal Place of Business

P.O. BOX 22-0046 HOLLYWOOD, FL 33022 Mailing Address P.O. BOX 22-0046

HOLLYWOOD, FL 33022

**FILED** Feb 20, 2006 08:00 AM Secretary of State



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02172006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 27-0109388

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STENGEL, JOHN H 3501 N. 54TH AVE. HOLLYWOOD, FL 33021

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<ol><li>The above named entity submits this statement for the purpose of characteristics of registered agent.</li></ol>	anging its registered office or registered agent, or both, in the S	tate of Florida. I am familiar with, and accept
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent algosture required when reinstating).	DATE
Filling Fee is \$50.00		

## Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME	MGR STENGEL, JOHN H
STREET ADDRESS CITY-ST-ZIP	P.O. BOX 22-0046 HOLLYWOOD, FL 33022
ITTLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STENGEL, MARAGRET J 3501 NORTH 54TH AVENUE HOLLYWOOD, FL 33921
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CXTY-ST-ZXP	
TITLE NAME STREET ADDRESS C(TY-ST-Z)P	
11. I hereby	certify that the information supplied with this filing does not qualify for the ex-

U90000439421 U3/01/06-80047-011 50.00

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Fiorida 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 508, Florida Statutes.