


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 06, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L04000082274</b> 1. Entity Name <b>AL'S ELECTRIC "L.L.C"</b>	
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Principal Place of Business <b>2832 CAMPUS CIRCLE MELBOURNE, FL 32935</b>	Mailing Address <b>2832 CAMPUS CIRCLE MELBOURNE, FL 32935</b>
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01032008 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-1905469</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent  <b>PAOLUCCI, ALBERT JR. 2832 CAMPUS CIRCLE MELBOURNE, FL 32935</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM PAOLUCCI, ALBERT JR. 2832 CAMPUS CIRCLE MELBOURNE, FL 32935</b>
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<b>UD00000378670 01/09/06-80017-012 50.00</b>  <b>DO NOT WRITE IN THIS SPACE</b>
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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:** Albert Paolucci Jr. **Albert Paolucci JR.** 1-4-06 321-254-6208  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #