

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084385

Entity Name: REVIVED HOLDINGS LLC

FILED
Jul 10, 2006
Secretary of State

Current Principal Place of Business:

4237 NW 36TH TERRACE
GAINESVILLE, FL 32605 US

New Principal Place of Business:

Current Mailing Address:

4237 NW 36TH TERRACE
GAINESVILLE, FL 32605 US

New Mailing Address:

FEI Number: 59-3683516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAX, HARRIS B OWNER
4237 NW 36TH TERRACE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MAX, HARRIS B OWNER
Address: 4237 NW 36TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: MGRM () Delete
Name: MAX, LYNN A OWNER
Address: 4237 NW 36TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: LYNN MAX

MGRM

07/10/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date