2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012241

Entity Name: "ALL ABOUT FINANCE & MORE", LLC

FILED Jan 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1633 E. VINE STREET
 1633 E. VINE STREET

 SUITE 216
 SUITE 215 & 216

KISSIMMEE, FL 34744 US

Current Mailing Address: New Mailing Address:

P.O. BOX 771596 P.O. BOX 771596

ORLANDO,, FL 32877 US

FEI Number: 75-3182716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEREZ, SAMUEL E
1633 E. VINE STREET
SUITE 216
KISSIMMEE, FL 34744 US
PEREZ, SAMUEL E
1633 E. VINE STREET
SUITE 215 & 216
KISSIMMEE, FL 34744 US
KISSIMMEE, FL 34744 US

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: SAMUEL E. PEREZ 01/10/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: P (X) Change () Addition

Name: PEREZ, SAMUEL E Name: PEREZ, SAMUEL E Address: 1633 E. VINE STREET SUITE 216 Address: 1633 E. VINE STREET SUITE 216

City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGRM () Delete Title: VP (X) Change () Addition Name: PEREZ, NANCY Name: RAMOS, FELIX

Address: 2869 PAIGE DRIVE Address: 2869 PAIGE DRIVE
City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741 US

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 PEREZ, NANCY

 Address:
 Address:
 2869 PAIGE DR

City-St-Zip: City-St-Zip: KISSIMMEE, FL 34741 US

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: SAMUEL E. PEREZ P 01/10/2006