2006 LIMITED LIABILITY COMPANY

FILED Apr 14, 2006 8:00 am Secretary of State

ANNUAL REPORT

DOCUMENT # L05000017665 1. Entity Name 04-14-2006 90030 030 ****55 00 DANIIL YEPISHIN REMODELING COMPANY, LLC Principal Place of Business Mailing Address 302 CAROLINA DR. #A 302 CAROLINA DR. #A PENSACOLA, FL 32534 PENSACOLA, FL 32534 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04102006 Chg-LLC CR2E083 (11/05) Applied For City & State City & State 4. FEI Number ✓ Not Applicable Žip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YEPISHIN, DANIIL 302 CAROLINA DR. #A Street Address (P.O. Box Number is Not Acceptable) PENSACOLA, FL 32534 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGRM YEPISHIN ANDREY MGR TITLE ☐ Delete тпі ғ Addition ☐ Change YEPISHIN, DANIIL NAME NAME 302 Caeolina De #A STREET ADDRESS 302 CAROLINA DR. #A STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32534 CITY-ST-ZIP Pensacola, F4,32534 TITLE MGR MGRM Delete TELE Addition ☐ Change RUDKOVSKIY PAVE L NAME YEPISHIN, VINITSIY NAME STREET ADDRESS 302 CAROLINA DR. #A STREET ADDRESS 302 Carolina dr # A CITY-ST-ZIP PENSACOLA, FL 32534 City-St-2iP Pensacola F4 32534 TITLE ☐ Delete TITLE MGRM ☐ Change Addition YEPISHIN VADIM NAME NAMÉ STREET ADDRESS 502 Carolina dr # A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Pensacola F4 32534 Gunenkov ERIC,MGRM TITLE ☐ Delete TITLE Addition ☐ Change NAME NAME 302 Caeolina dr # A STREET ADDRESS STREET ADDRESS CITY-S1-21P Pensacola, F4.32534 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

		empowered to execute this report as required by Chapt		mber of manager of the
SIGNATURE:	2/11/	Testshir	04/11/06	
SIGNATURE AND TYPED OR	PRINTED NAME OF	SCHOOL MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESE	NTATIVE Bate	Daytime Phone #