

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022003

FILED
Jan 18, 2006
Secretary of State

Entity Name: E D CONSTRUCTION & HANDYMAN SERVICE, LLC

Current Principal Place of Business:

809 N. THACKER AVENUE
KISSIMMEE, FL 34741

New Principal Place of Business:

4303 CARRINGTON WAY
KISSIMMEE, FL 34746

Current Mailing Address:

809 N. THACKER AVENUE
KISSIMMEE, FL 34741

New Mailing Address:

4203 CARRINGTON WAY
KISSIMMEE, FL 34746

FEI Number: 61-1485043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, ELIAS
809 N. THACKER AVE.
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

DIAZ, ELIAS
4203 CARRINGTON WAY
KISSIMMEE, FL 34746 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: ELIAS DIAZ

01/18/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DIAZ, ELIAS & WILDNE, LLIA, TEN. BY E NT.
Address: 809 N. THACKER AVENUE
City-St-Zip: KISSIMMEE, FL 34741

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DIAZ, ELIAS & WILDNE, LLIA, TEN. BY E NT.
Address: 4203 CARRINGTON WAY
City-St-Zip: KISSIMMEE, FL 34746

Title: MGR () Change (X) Addition
Name: WILDENALLIA DIAZ,
Address: 4203 CARRINGTON WAY
City-St-Zip: KISSIMMEE, FL 34746

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: WILDENELLIA DIAZ

MGR

01/18/2006

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