

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025289

FILED
Feb 02, 2007
Secretary of State

Entity Name: ABSOLUTE DISASTER SERVICES, LLC

Current Principal Place of Business:

287 WOODBURY PINES CIRCLE
ORLANDO, FL 32828

New Principal Place of Business:

9640 BOGGY CREEK ROAD
UNIT 6
ORLANDO, FL 32828

Current Mailing Address:

287 WOODBURY PINES CIRCLE
ORLANDO, FL 32828

New Mailing Address:

6039 CYPRESS GARDENS BLVD.
#502
WINTER HAVEN, FL 33884

FEI Number: 20-2518695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, GEORGE
287 WOODBURY PINES CIRCLE
ORLANDO, FL 32828 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: MGR () Delete
Name: HERNANDEZ, GEORGE
Address: 287 WOODBURY PINES CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: MGR () Delete
Name: HERNANDEZ, MARILYN
Address: 287 WOODBURY PINES CIRCLE
City-St-Zip: ORLANDO, FL 32828

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: GEORGE HERNANDEZ

MGR

02/02/2007

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