

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044547

FILED  
May 01, 2006  
Secretary of State

Entity Name: SIX STEPS HOLDINGS L.L.C.

**Current Principal Place of Business:**

9965 MIRAMAR PARKWAY #293  
MIRAMAR, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

9965 MIRAMAR PARKWAY #293  
MIRAMAR, FL 33025

**New Mailing Address:**

FEI Number: 56-2513938      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:**

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

MCCALLA, FLO  
3399 FOXCROFT ROAD, #105  
MIRAMAR, FL 33025      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCCALLA, FLO  
Address: 3399 FOXCROFT ROAD, #105  
City-St-Zip: MIRAMAR, FL 33025

Title: MGRM ( ) Delete  
Name: WRIGHT, MOREY  
Address: 7667 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGRM ( ) Delete  
Name: RUSSELL, ALTHEA  
Address: 526 NW 158TH LANE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM ( ) Delete  
Name: MCCORMACK, PAUL  
Address: 5709 TUSCANY TERRACE  
City-St-Zip: TAMARAC, FL 33321

Title: MGRM ( ) Delete  
Name: MONDELLI, JOSEPH JR  
Address: 7891 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33056

Title: MGRM ( ) Delete  
Name: MUNDY, DONNA  
Address: 9965 MIRAMAR PARKWAY #293  
City-St-Zip: MIRAMAR, FL 33025

**ADDITIONS/CHANGES:**

Title: A (X) Change ( ) Addition  
Name: MCCALLA, FLO  
Address: 3399 FOXCROFT ROAD, #105  
City-St-Zip: MIRAMAR, FL 33025

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

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

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

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: FLO MCCALLA

A

05/01/2006

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