

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045274

FILED  
Jul 10, 2006  
Secretary of State

Entity Name: HYDRAKLEEN LLC

## Current Principal Place of Business:

109 S AVENUE  
FT. WALTON BEACH, FL 32547 US

## New Principal Place of Business:

109 SOUTH AVENUE  
FT. WALTON BEACH, FL 32547 US

## Current Mailing Address:

109 S AVENUE  
FT. WALTON BEACH, FL 32547 US

## New Mailing Address:

109 SOUTH AVENUE  
FT. WALTON BEACH, FL 32547 US

FEI Number: 20-2826160      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:

MARTIN, WYNN  
109 S AVENUE  
FT. WALTON BEACH, FL 32547 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: MGRM ( ) Delete  
Name: MALLIN, SHAWN  
Address: 5 BEDFORD PLACE  
City-St-Zip: FT. WALTON BEACH, FL 32547 US

Title: MGRM ( ) Delete  
Name: MARTIN, WYNN  
Address: 1681 19TH STREET  
City-St-Zip: NICEVILLE, FL 32578 US

Title: MGRM ( ) Delete  
Name: MARTIN, JEFFERY  
Address: 311 21ST STREET  
City-St-Zip: NICEVILLE, US 32578 US

## ADDITIONS/CHANGES:

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: WYNN MARTIN

MGRM

07/10/2006

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