2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050723

Address:

City-St-Zip:

Entity Name: LUBRANO LAWN CARE LLC.

FILED Apr 14, 2006 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | |
|--|-------------------------------------|---|---------------------------------------|
| P.O.BOX 4614 TAMPA, FL 33677 | | | |
| Current Mailing Address: | | New Mailing Address: | |
| P.O.BOX 4614 TAMPA, FL 33677 | | | |
| FEI Number: 20-2882106 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | Name and Address of New Registered Agent: | |
| LUBRANO, JOSE V JF 901 W. ADALEE ST. TAMPA, FL 33603 | R US | | |
| The above named enti in the State of Florida. | ty submits this statement for the p | ourpose of changing its registere | d office or registered agent, or both |
| SIGNATURE: | | | |
| Electronic Signature of Registered Ag | | ent | Date |
| MANAGING MEMBERS/MANAGERS: | | ADDITIONS/CHANGES: | |
| Title: Name: | () Delete | Title: MGR Name: LUBRANO. | ()Change(X)Addition KRISTEN L |

Address:

City-St-Zip:

901 W. ADALEE ST.

TAMPA, FL 33603 US

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: KRISTEN LUBRANO MGR 04/14/2006