2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060369

City-St-Zip:

Entity Name: COMPLETE CONVERSIONS, LLC

FILED Mar 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ATTN: GUS/JOHN 10474 N.W. 31ST TERR DORAL, FL 33172 **Current Mailing Address: New Mailing Address:** ATTN: GUS/JOHN 10474 N.W. 31ST TERR DORAL, FL 33172 FEI Number: 71-0986509 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: GALLARDO, GUSTAVO ATTN: GUS/JOHN 10474 N.W. 31ST TERR DORAL, FL 33172 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GALLARDO, GUSTAVO Name: Name: Address: 10474 N.W. 31ST TERR Address: City-St-Zip: DORAL, FL 33172 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: QUINTANA, JOHN Name: Address: 10474 N.W. 31ST TERR Address: City-St-Zip: DORAL, FL 33172 City-St-Zip: Title: () Delete Title: MGRM () Change (X) Addition GONZALEZ-ARANGO, MANUEL A Name: Name: 10474 N.W. 31ST TERR Address: Address:

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.

City-St-Zip:

DORAL, FL 33172

SIGNATURE: GUSTAVO GALLARDO MGRM 03/30/2006