

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068138

Entity Name: BUILD MASTERS ,LC

FILED
Apr 14, 2006
Secretary of State

Current Principal Place of Business:

5970 SW 18TH ST
224
BOCA RATON, FL 33433

New Principal Place of Business:

1757 BANKS RD
MARGATE, FL 33063

Current Mailing Address:

5970 SW 18TH ST
224
BOCA RATON, FL 33433

New Mailing Address:

1757 BANKS RD
MARGATE, FL 33063

FEI Number: 20-3264939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEHADEH, MAMOUN
5970 SW 18TH ST
224
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

SHEHADEH, MAMOUN
1757 BANKS RD
MARGATE, FL 33063 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: MAMOUN SHEHADEH

04/14/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHEHADEH, MAMOUN
Address: 5970 SW 18TH ST # 224
City-St-Zip: BOCA RATON, FL 33433 US

Title: MGR () Delete
Name: SALAMEH, SANA
Address: 5970 SW 18TH ST #224
City-St-Zip: BOCA RATON, FL 33433 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SHEHADEH, MAMOUN
Address: 19824 BOCA GREENS DR
City-St-Zip: BOCA RATON, FL 33498 US

Title: MGR (X) Change () Addition
Name: SALAMEH, SANA
Address: 19824 BOCA GREENS DR
City-St-Zip: BOCA RATON, FL 33498 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: MAMOUN SHEHADEH

MG

04/14/2006

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