

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087020

FILED
Apr 19, 2006
Secretary of State

Entity Name: COMPLETE WACK JOB LLC

Current Principal Place of Business:

185 HASKELL ROAD
FT. PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

185 HASKELL ROAD
FT. PIERCE, FL 34945

New Mailing Address:

FEI Number: 20-3414766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASKELL, FRANK
185 HASKELL ROAD
FT. PIERCE, FL 34945 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: HASKELL, FRANK
Address: 185 HASKELL ROAD
City-St-Zip: FT. PIERCE, FL 34945

Title: MGRM () Delete
Name: O'BRIEN, PATRICK J
Address: 4430 N.E. 15TH TERRACE
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

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: PATRICK O'BRIEN

MGRM

04/19/2006

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