

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jun 05, 2006 8:00 am
Secretary of State

05-01-2006 90066 019 ****50.00

DOCUMENT # L05000089234

1. Entity Name
PETER J. LETO, LLC



Principal Place of Business
6148 NW 74TH TERRACE
PARKLAND, FL 33067 US

Mailing Address
6148 NW 74TH TERRACE
PARKLAND, FL 33067 US

30009591

2. Principal Place of Business
5851 Holmberg Road
Suite, Apt. #, etc.
Apt. #1714

3. Mailing Address
5851 Holmberg Road
Suite, Apt. #, etc.
Apt. #1714

03212006 Chg-LLC CR2E083 (11/05)

City & State
Parkland, Florida

City & State
Parkland, Florida

4. FEI Number
20-3446574

Applied For
Not Applicable

Zip 33067

Country

Zip 33067

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LETO, PETER J
6148 NW 74TH TERRACE
PARKLAND, FL 33067

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
5851 Holmberg Road
Apt. #1714
City Parkland FL Zip Code 33067

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LETO, PETER J 6148 NW74TH TERRACE PARKLAND, FL 33067	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	5851 Holmberg Road, #1714 Parkland, Florida 33067	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Peter J. Leto Jr.* Peter J. Leto Jr. 4/28/06 754-3837622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone