## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000092475

Address:

City-St-Zip:

Entity Name: ONE SOURCE RELIABILITY INVESTMENTS, LLC

FILED Mar 25, 2006 Secretary of State

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
1360 S.W. 56TH AVENUE			8415 MULLIGAN (	8415 MULLIGAN CIRCLE	
PLANTATION, FL 33317 FL		SUITE A			
			PORT ST. LUCIE, FL 349863294 US		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
1360 S.W. 56TH AVENUE		1360 S.W. 56TH AVENUE			
PLANTAT	ION, FL 33317	FL	PLANTATION, FL	33317 US	
FEI Number	: 20-3500310	FEI Number Applied For ( )	FEI Number Not Applicable (	) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
1360 S.W.	SCONE, NICK 56TH AVENUE ION, FL 33317	E US			
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its regis	tered office or registered agent, or both	
SIGNATUI	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title:	MGRM ()	Delete	Title:	( ) Change ( ) Addition	
Name:	CAMPARSCONE		Name:	( )	
Address:	1360 S.W. 56TH	AVENUE	Address:		
City-St-Zip:	PLANTATION, F	_ 33317 US	City-St-Zip:		
Title:	MGRM ()	Delete	Title:	( ) Change ( ) Addition	
Name:	KANE, JAMES P 8415 MULLIGAN CIRCLE		Name:		
Address:			Address:		
City-St-Zip:	PORT ST. LUCIE	E, FL 34986 US	City-St-Zip:		
Title:	MGRM ( ) Delete		Title:	Fitle: ( ) Change ( ) Addition	
Name: FREDA, MIKE			Name:		
Address: 99 LINDEN AVENUE			Address:		
City-St-Zip:	RED BANK, NJ	07701 US	City-St-Zip:		
Title: Name:	( )	Delete	Title: MGRM Name: COALF	( ) Change (X) Addition KEY, ROBERT J	

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.

Address:

550 OCEAN CAY City-St-Zip: KEY LARGO, FL 33037 US

SIGNATURE: NICK CAMPARSCONE **MGRM** 03/25/2006