

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101091

FILED  
Jan 17, 2006  
Secretary of State

Entity Name: WIRELESS ADVICE OF PORT ST. LUCIE LLC

## Current Principal Place of Business:

PO BOX 492036  
FORT LAUDERDALE, FL 33349

## New Principal Place of Business:

PO BOX 492036  
FORT LAUDERDALE, FL 33349 US

## Current Mailing Address:

PO BOX 492036  
FORT LAUDERDALE, FL 33349

## New Mailing Address:

PO BOX 492036  
FORT LAUDERDALE, FL 33349 US

FEI Number: 20-3623686

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOULET, BEN  
18540 SW 43 STREET  
MIRAMAR, FL 33029 US

## Name and Address of New Registered Agent:

BOULET, BEN B MR.  
18540 SW 43 STREET  
MIRAMAR, FL 33029 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: BEN BOULET

01/17/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BOULET, BEN  
Address: 18540 SW 43 STREET  
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGR ( ) Delete  
Name: CAREY, LATANNIA  
Address: 4402 SW CACAO STREET  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: MGR ( ) Delete  
Name: CAREY, LATASHA  
Address: 981 SW MC ELROY AVENUE  
City-St-Zip: PORT ST. LUCIE, FL 34953

## ADDITIONS/CHANGES:

Title: PD (X) Change ( ) Addition  
Name: BOULET, BEN B MR.  
Address: PO BOX 492036  
City-St-Zip: FORT LAUDERDALE, FL 33349 US

Title: VP (X) Change ( ) Addition  
Name: CAREY, LATANNIA  
Address: 4402 SW CACAO STREET  
City-St-Zip: PORT ST. LUCIE, FL 34953

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: BEN BOULET

MR.

01/17/2006

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