

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000101467

FILED
Sep 29, 2006
Secretary of State

Entity Name: BEST BARGAIN CONSTRUCTION CONSULTANTS LLC

Current Principal Place of Business:

3108 MURA DR.
FORT PIERCE, FL 34982

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1291
FT. PIERCE, FL 34954

New Mailing Address:

FEI Number: 20-3701878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, BRENDA
BEST BARGAIN CONSTRUCTION CONSULTANTS
3108 MURE DR.
FORT PIERCE, FL 34982 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: BRENDA, MOORE
Address: P.O. BOX 1291
City-St-Zip: FORT PIERCE, FL 34954

Title: MGRM () Delete
Name: LESLIE, FORD
Address: P.O. BOX 1291
City-St-Zip: FORT PIERCE, FL 34954

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: PENALVER, JEAN M
Address: P.O. BOX 1291
City-St-Zip: FT. PIERCE, FL 34954

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: JEAN PENALVER

MGRM

09/29/2006

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