

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106747

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: THE FAB SHOP, LLC

**Current Principal Place of Business:**

6157 RALEIGH ST  
APT 1412  
ORLANDO, FL 32835 US

**New Principal Place of Business:**

**Current Mailing Address:**

6157 RALEIGH ST  
APT 1412  
ORLANDO, FL 32835 US

**New Mailing Address:**

FEI Number: 20-3726538      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SMALLEY & COMPANY, P.L.  
1517 E HILLCREST STREET  
ORLANDO, FL 32803 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: BOURASSA, WILLIAM J SR  
Address: 273B MOSSWOOD CIRCLE  
City-St-Zip: WINTER SRPINGS, FL 32708 US

Title: MGRM ( ) Delete  
Name: BOURASSA, MATTHEW J  
Address: 6157 RALEIGH ST, APT 1412  
City-St-Zip: ORLANDO, FL 32835 US

**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: MATTHEW JAMES BOURASSA

MGRM

04/26/2006

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