## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116733

City-St-Zip:

Entity Name: DR. CREDIT REPAIR LLC

FILED Feb 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10773 NW 58 ST 16332 SW 23 STREET MIRAMAR, FL 33027 DORAL, FL 33178 **Current Mailing Address: New Mailing Address:** 10773 NW 58 ST 16332 SW 23 STREET MIRARMA, FL 33027 DORAL, FL 33178 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JHON, LONDONO VALENCIA, GINA M 16332 SW 23 STREET 10773 NW 58 ST MIRAMAR, FL 33027 US 296 DORAL, FL 33178 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: GINA MARCELA VALENCIA 02/13/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: ( ) Delete MGR Title: () Change () Addition LONDONO, JHON Name: Name: Address: 10773 NW 58 ST # 296 Address: City-St-Zip: DORAL, FL 33178 City-St-Zip: Title: () Delete Title: MGR ( ) Change (X) Addition Name: Name: VALENCIA, GINA M Address: Address: 16332 SW 23 STREET

City-St-Zip:

MIRAMAR, FL 33027

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: GINA MARCELA VALENCIA MGR 02/13/2006