2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# L05000120844

Entity Name: A2Z PROFESSIONAL INSPECTIONS, LLC.

Current Principal Place of Business:

P.O. BOX 1165
PALMETTO, FL 34220

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1165
PALMETTO, FL 34220

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEEBLES & MORIARTY, P.A.
1111 3RD AVENUE WEST, SUITE 210
BRADENTON, FL 34205 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: ( ) Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: FOY, MATTHEW
Address: P.O. BOX 1165
City-St-Zip: PALMETTO, FL 34220

Title: MGRM ( ) Change (X) Addition
Name: FOY, CHRISTINE
Address: P.O. BOX 1165
City-St-Zip: PALMETTO, FL 34220

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: BRENDEN S. MORIARTY AS ATTY FOR MATT FOY MGRM 04/28/2006

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