## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000120844

FOY, CHRISTINE

PALMETTO, FL 34220

P.O. BOX 1165

Name:

Address:

City-St-Zip:

Entity Name: A2Z PROFESSIONAL INSPECTIONS, LLC.

FILED Apr 09, 2007 Secretary of State

Current Pi	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
P.O. BOX 1165 PALMETTO, FL 34220				1112 6TH STREET WEST PALMETTO, FL 34221	
Current M	ailing Addre	ss:	New Mailing Addres	New Mailing Address:	
P.O. BOX <sup>*</sup> PALMETT(	1165 O, FL 34220				
FEI Number:	51-0561632	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
PEEBLES & MORIARTY, P.A. 1111 3RD AVENUE WEST, SUITE 210 BRADENTON, FL 34205 US					
	named entity of Florida.	submits this statement for the pu	urpose of changing its registere	ed office or registered agent, or both	
SIGNATUF					
Electronic Signature of Registered Agent			nt	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM ( FOY, MATTHE P.O. BOX 116 PALMETTO, F	5	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	MGRM (	) Delete	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: CHRISTINE FOY MGRM 04/09/2007