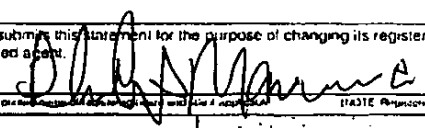
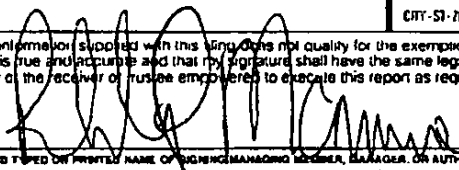


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Sep 06, 2007 8:00 am
Secretary of State

07-30-2007 90029 003 ****50.00

DOCUMENT # L06000058583					
1. Entity Name ABSOLUTE RENOVATION & REPAIRS LLC					
Principal Place of Business 4280 SOUTH LANDAR DRIVE LAKE WORTH FL 33463			Mailing Address 4280 SOUTH LANDAR DRIVE LAKE WORTH FL 33463		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 263-57-9879	
				☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				State FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 				DATE 9-1-07	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 5, 2007					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	NAME	STREET ADDRESS CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS CITY - ST - ZIP
	MGR	MARRONE, PHILLIP 4280 SOUTH LANDAR DRIVE LAKE WORTH FL 33463			
	S	MARRONE, PHILLIP 4280 SOUTH LANDAR DRIVE LAKE WORTH FL 33463			
	T	MARRONE, PHILLIP 4280 SOUTH LANDAR DRIVE LAKE WORTH FL 33463			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.					
SIGNATURE: 			DATE 9-1-02 561-633-2450		