

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088613

FILED
May 07, 2007
Secretary of State

Entity Name: CZ HANDYMAN SERVICE "LLC"

Current Principal Place of Business:

TREE RIDGE LANE NE
3516
PALM BAY, FL 32905 US

New Principal Place of Business:

881 EDWARDS ST NE
PALM BAY, FL 32905 US

Current Mailing Address:

TREE RIDGE LANE NE
3516
PALM BAY, FL 32905 US

New Mailing Address:

881 EDWARDS ST NE
PALM BAY, FL 32905 US

FEI Number: 65-1290301 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

JOSEPH, ZEPHRUS R
3516 TREE RIDGE LANE NE
3516
PALM BAY, FL 32905 US

Name and Address of New Registered Agent:

JOSEPH, ZEPHRUS R
881 EDWARDS ST NE
PALM BAY, FL 32905 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: ZEPHRUS JOSEPH

05/07/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOSEPH, ZEPHRUS R MR
Address: 3516 TREE RIDGE LANE NE
City-St-Zip: PALM BAY, FL 32905 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOSEPH, ZEPHRUS R MR
Address: 881 EDWARDS ST NE
City-St-Zip: PALM BAY, FL 32905 US

I hereby certify that the information supplied with this filing does not qualify 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: ZEPHRUS JOSEPH

MGR

05/07/2007

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