

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000113173

1. Entity Name
FLORIDA WATERBLASTING, LLC



Principal Place of Business

309 BAYSIDE ROAD
LAKE WORTH, FL 33461 US

Mailing Address

PO BOX 22698
WEST PALM BEACH, FL 33416 US



01162008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5978438

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLLINS, MICHAEL S
2672 WORCESTER ROAD
LAKE WORTH, FL 33462

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME A.S.A. ENTERPRISES LIMITED, INC.
STREET ADDRESS 309 BAYSIDE ROAD
CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE MGRM
NAME TAJ ENTERPRISES UNLIMITED, INC.
STREET ADDRESS 2672 WORCESTER ROAD
CITY-ST-ZIP LAKE WORTH, FL 33462

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U000000789011
01/22/08-80009-002 138.75

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IN THIS SPACE**

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 608, Florida Statutes.

SIGNATURE:

Michael S. Collins

Michael S. Collins

1-16-08

561-644-3814

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #