## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Apr 11, 2008 08:00 AN Secretary of State DOCUMENT # L06000122935 1. Entity Name PRO PERFORMANCE PRESSURE WASHING & FLEET WASHING LLC Principal Place of Business Mailing Address 215 LAKEWAY LANE PO BOX 584 APOLLO BEACH, FL 33572 RIVERVIEW, FL 33569 02192008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPA Applied For 4. FEI Number 20-8125362 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BESNIER DONALD DO NOT WRITE 215 LAKEWAY LANE APOLLO BEACH, FL 33572 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE **MGRM** BESNIER, DONALD NAME PO BOX 584 STREET ADDRESS CITY-ST-ZIP RIVERVIEW, FL 33569 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP

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