


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L93000000202	
1. Entity Name SEVEN D. WHOLESALE OF FLORIDA, L.C.	

Principal Place of Business 1255 S MILITARY TRAIL STE 210 DEERFIELD BEACH, FL 33442	Mailing Address 3229 PLEASANT VALLEY BLVD. ALTOONA, PA 16602
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07032006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

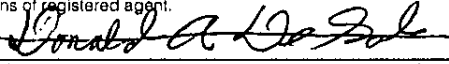
4. FEI Number 65-0364464	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEGOL, DONALD A
 1255 S MILITARY TRAIL
 STE 210
 DEERFIELD BEACH, FL 33442

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:  7-6-06 DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEGOL, DONALD A 1255 S MILITARY TRAIL, STE 210 DEERFIELD BEACH, FL 33442
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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:  7-6-06 814-941-7777 DATE Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Daytime Phone #