2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2006
Secretary of State

DOCUMENT# L95000000986

Entity Name: REST AREA, L.L.C.

Current Principal Place of Business:

66 NORTH ATLANTIC AVENUE
SUITE 204
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

66 NORTH ATLANTIC AVENUE
SUITE 204
COCOA BEACH, FL 32931 US

New Mailing Address:

FEI Number: 59-3348227 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JIRUSKA, RAYMOND L
3610 OCEAN BEACH BLVD.,
APT #103B
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

JIRUSKA, RODNEY R
66 NORTH ATLANTIC AVENUE
SUITE #204
COCOA BEACH, FL 32931 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: RODNEY JIRUSKA 02/27/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: JIRUSKA, RAYMOND L
Address: 3610 OCEAN BEACH BLVD. #103B
City-St-Zip: COCOA BEACH, FL 32931

Title: MGR ( ) Delete
Name: JIRUSKA, RODNEY R
Address: 201 NORTH RIVERSIDE DRIVE, #201
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: JIRUSKA, RODNEY R
Address: 201 NORTH RIVERSIDE DRIVE, #201
City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the 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: RODNEY JIRUSKA MGRM 02/27/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date