2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000006054

1. Entity Name
MONTANARO BROTHERS, L.L.C.

Principal Place of Business	Mailing Address
4113 HENDERSON BLVD. TAMPA, FL 33629	4113 HENDERSON BLVD. TAMPA, FL 33629

DO NOT WRITE IN THIS SPACE

01082006No Chg-LLC CR2E083 (11/05)

4. FEI Number
59-3597796
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LAWSON, MONICA ZIMMER
ZIMMER & LAWSON ACCOUNTING SERVICE
2403 STATE STREET
TAMPA, FL 33609

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

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MONTANARO, ANGELO C
STREET ADDRESS	4113 HENDERSON BLVD
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	MGRM
NAME	MONTANARO, ANTHONY
STREET ADDRESS	8981 CYPRESS CIRCLE
CITY-ST-ZIP	NORTH ROYALTON, OH 44133
TITLE	MGRM
NAME	MONTANARO, BEVERLY
STREET ADDRESS	8981 CYPRESS CIRCLE
CITY-ST-ZIP	NORTH ROYALTON, OH 44133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

#000000398899
01/31/06-80017-013 50.00

DO NOT WRITE 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: [signature] - Angelo C Montanaro 1/14/06 (813)289-1634
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #