2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 03, 2006 8:00 am Secretary of State

Pincipal Place of Business	DOCUMENT # M0000000898 1. Entity Name BEAULIEU GROUP, LLC								04-03-2006	90061 0)2 ****50).00
Suite, Apt 4, etc.	1502 CORONET DRIVE			1502 CORONET DRIVE								
Cay & State	2. Principal Place of Business			3. Mailing Address								
Country Zop	Suite, Apt. #, etc.		Suite, Apt. #, etc.				03222006	Chg-LLC	CR2E)83 (1 1 /05)		
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Name	Zip	Zip Country		Zip	Zip Count							
CTOCORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 ocligations of registered agent, used or prince or registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, used or prince or registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, used or prince or registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, used or prince or registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, used or prince or registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or both, in the State of Florida. I am familiar with, and accept the ocligation of registered agent, or registered agent, or both, in the State of Florida.		6. Name	and Address of Current	Registered Agent				7. Name and	Address of New I	Registered	Agent	
PLANTATION, FL 33324 City FL Zip Code					<u> </u>			O Bauthanh		1-3		
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature Filling Fee is \$50.00 Dub by May 1, 2008 Filling Fee is \$50.00 Make check payable to Florida Department of State						Street Ad	eet Address (P.O. Box Number is Not Acceptable)					
8. The above named entity submits his statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE						City		 .		FI	Zip Cod	е
Filling Fee is \$50.00 BY May 1, 2006 SITUE MGRM BOUCKAERT, CARL M SITUE MGRM BOUCKAERT, CARL M SITUE MGRM BOUCKAERT, MARIE T SITUE MORM SITUE MGRM SITUE MGRM BOUCKAERT, MARIE T SITUE MORM SITUE MORM MAWE SITUE ADDRESS CITY-ST-2P	8. The above the obligat	named entiti	y submits this statement for tered agent.	or the purpose of changing its	s registere	J ad office or r	registere	ed agent, or both	n, in the State of F		familiar with,	and accept
Filing Fee is \$50.00 by May 1, 2006 9. MANAGING MEMBERS/MANAGERS ITILE MGRM BOUCKAERT, CARL M STREET ADDRESS CITY-ST-2IP TITLE MGRM BOUCKAERT, MARIE T BOUCKAERT BOUCKAERT BOUCKAERT BOUCKAERT BOUCKAERT BOUCKAERT BOUCKAERT	SIGNATURE .	Signature, typed	or printed name of registered agent	and title if applicable. (NO	TE: Registere	d Agent signatur	re required t	when reinstating)		DATE		
9. MANAGING MEMBERS / MANAGERS 110. MGRM SURCET, CARL M STREET ADDRESS MGRM STREET ADDRESS MGRM												
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limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Carl m/b. u-kar+ 3/30/04 706-272-7321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE CEO Date Dayume Proce #