

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001505

Entity Name: QUATRO, LLC

FILED  
Jul 24, 2006  
Secretary of State

## Current Principal Place of Business:

C/O DUKE S. KASSOLIS  
6 IVY BROOK FARM CT.  
HUNT VALLEY, MD 21030

## New Principal Place of Business:

C/O DUKE S. KASSOLIS  
1436 GORMICAN LANE  
NAPLES, FL 34110

## Current Mailing Address:

C/O DUKE S. KASSOLIS  
1436 GORMICAN LANE  
NAPLES, FL 34110

## New Mailing Address:

FEI Number: 52-2324928      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324    US

## Name and Address of New Registered Agent:

KASSOLIS, DUKE S MGRM  
1436 GORMICAN LANE  
NAPLES, FL 34110    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: DUKE KASSOLIS

07/24/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: KASSOLIS, DUKE S  
Address: 1436 GORMICAN LANE  
City-St-Zip: NAPLES, FL 34110

Title: MGRM      ( ) Delete  
Name: KASSOLIS, JANE S  
Address: 1436 GORMICAN LANE  
City-St-Zip: NAPLES, FL 34110

Title: MGRM      ( ) Delete  
Name: KASSOLIS, KRISTINA  
Address: 6 IVY BROOK FARM COURT  
City-St-Zip: HUNT VALLEY, MD 21030

Title: MGRM      ( ) Delete  
Name: KASSOLIS, JONATHON  
Address: 6 IVY BROOK FARM COURT  
City-St-Zip: HUNT VALLEY, MD 21030

## ADDITIONS/CHANGES:

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

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

Title: MGRM      (X) Change ( ) Addition  
Name: KASSOLIS, KRISTINA  
Address: 1436 GORMICAN LANE  
City-St-Zip: NAPLES, FL 34110

Title: MGRM      (X) Change ( ) Addition  
Name: KASSOLIS, JONATHON  
Address: 1436 GORMICAN LANE  
City-St-Zip: NAPLES, FL 34110

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: DUKE KASSOLIS

MGRM

07/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date