2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000001934

1. Entity Name

Principal Place of Business

CARBONTRONICS, LLC

Mailing Address

1401 MANATEE AVENUE WEST, SUITE 910 BRADENTON, FL 34205

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FILED May 04, 2006 8:00 am Secretary of State

05-04-2006 90026 037 ***150.00



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03102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired 55.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MURRELL, FREDERICK J % CARBON RESOURCES, INC. 1401 MANATEE AVENUE WEST, SUITE 910 BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of charions of registered agent.	nging its registere	d office or registered agent, or both, in the S	itate of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MURRELL, FREDERICK J 1401 MANATEE AVENUE WEST, SUITE 910 BRADENTON, FL 34205			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR MILLER, DOUGLAS E 1075 HARBOR ISLAND LANE VERO BEACH, FL 32967			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ELLIOTT, E.J. 5201 NORTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32810		DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			in This	S SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE				

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 AND VPET OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS

Daytime Phone #