

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# Z00447

Entity Name: BAY AREA YELLOW CAB, L.C.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

16691 US 19 NORTH
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

16691 US 19 NORTH
CLEARWATER, FL 33764

New Mailing Address:

24957 BREST ROAD
TAYLOR, MI 48180

FEI Number: 59-3083437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAHAN, THOMAS
16991 US 19 NORTH
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: TCD () Delete
Name: MEATHE, CULLAN F
Address: 645 GRISWOLD, SUITE 2202
City-St-Zip: DETRIOT, MI 48226

Title: PS () Delete
Name: RET, DANIEL
Address: 24957 BREST ROAD
City-St-Zip: TAYLOR, MI 48180

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MEATHE, CULLAN F
Address: 645 GRISWOLD, SUITE 2202
City-St-Zip: DETRIOT, MI 48226

Title: MGR (X) Change () Addition
Name: RET, DANIEL
Address: 24957 BREST ROAD
City-St-Zip: TAYLOR, MI 48180

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: DANIEL RET

MGR

04/24/2006

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