

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029982

FILED
Jun 22, 2005
Secretary of State

Entity Name: ANTONIO PELUQUERIA, LLC

Current Principal Place of Business:

C/O 20221 N.E. 10TH CT
MIAMI, FL 33179

New Principal Place of Business:

5642 LUIS XIV CT APT. A
TAMPA, FL 33614

Current Mailing Address:

C/O 20221 N.E. 10TH CT
MIAMI, FL 33179

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

Name and Address of New Registered Agent:

AMERICAN VISA NETWORK
C/O 20221 N.E. 10TH CT
MIAMI, FL 33179 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: PELUQUERIA, ANTONIO
Address: KIA 50A 34731
City-St-Zip: BELLO-ANT,

Title: MGRM (X) Change () Addition
Name: BELL, EVETTE L
Address: 5642 LUIS XIV CT APT. A
City-St-Zip: TAMPA, FL 33614

Title: MGRM (X) Delete
Name: ARBOLEDA, ISABEL CRISTIN
Address: C/O 20221 N.E. 10TH CT
City-St-Zip: MIAMI, FL 33179

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

Title: MGRM (X) Delete
Name: ARBOLEDA, ANTONIO MARIA
Address: C/O 20221 N.E. 10TH CT
City-St-Zip: MIAMI, FL 33179

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EVETTE LILLIAN BELL

MGRM

06/22/2005

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