

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051155

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: RK T-SHIRTS, LLC

**Current Principal Place of Business:**

202 SOUTH 22ND STREET  
SUITE 210  
TAMPA, FL 33605

**New Principal Place of Business:**

**Current Mailing Address:**

202 SOUTH 22ND STREET  
SUITE 210  
TAMPA, FL 33605

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MICHAEL, GROUSE J  
202 SOUTH 22ND STREET  
SUITE 210  
TAMPA, FL 33605 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: MGRM ( ) Delete  
Name: MICHAEL, GROUSE J  
Address: 202 SOUTH 22ND STREET #210  
City-St-Zip: TAMPA, FL 33605

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGR ( ) Change (X) Addition  
Name: GROUSE, CJ  
Address: 3913 HUNTMEADOWN DR  
City-St-Zip: CHARLOTTE, NC 28269

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: MICHAEL GROUSE                      MGRM                      04/25/2006

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