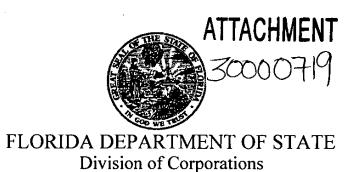
## 2006 LIMITED LIABILITY COMPANY

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**SIGNATURE** 

## Feb 20, 2006 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # L05000087820** 01-24-2006 90064 044 \*\*\*\*50.00 1. Entity Name FOOD ART BY CHARLIE, LLC Principal Place of Business Mailing Address 30000719 33 NE 1ST AVENUE 33 NE 1ST AVENUE WILLISTON, FL 32696 US WILLISTON, FL 32696 2. Principal Place of Business 3. Maiting Address Suite, Apt. 8, etc. Suite, Apt. #, etc. 01172006 Chg-LLC CR2E083 (11/05) Clty & State City & State 4. FEI Number Applied For *、*⊋n-34743 Not Applicable Zio Country Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHARON C BRANNAN CPA PA Street Address (P.O. Box Number is Not Acceptable) 161 N MAIN STREET WILLISTON, FL 32698 City Zip Code 8. 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. Fam familiar with, and accept Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM TITLE ☐ Change MEIER, CHARLES R NAME STREET ADORESS 33 NE 1ST AVENUE STREET AMORESS CITY-ST- OP WILLISTON, FL 32696 DIY-SI-ZP TITLE ☐ Delete TITLE Change Addition HASE MAJE STREET ADDRESS STREET ADDRESS CTIY-ST-ZP CTY-ST- ZP me TITLE ☐ Detate ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CTTY-ST-20P TITLE Detetz UNE ☐ Change Addition NAME HAME STREET ADORESS STREET ADORESS CTY-ST-ZP CITY-ST-ZIP nne TITLE Delete [] Change Addition NAME STREET ADORESS STREET ADORESS CITY-ST-ZP CITY-ST-ZIP TITLE TITLE Delete Channe Addition NAME MALLE STREET ADORESS STREET ADORESS CITY-ST-7/P 11. I hereby certify that the information supplied with this filling 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 808, Florida Statutes.



January 30, 2006

FOOD ART BY CHARLIE, LLC 33 NE 1ST AVENUE WILLISTON, FL 32696 US

Subject: FOOD ART BY CHARLIE, LLC

Reference Number:

L05000087820

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE ANNUAL REPORTS SECTION