

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000061069

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Entity Name:** CONNEXT PROMOTIONS, LLC

**Current Principal Place of Business:**

625 DANUBE AVENUE  
TAMPA, FL 33606 US

**New Principal Place of Business:**

609 W. AZEELE ST.  
SUITE D  
TAMPA, FL 33606 US

**Current Mailing Address:**

625 DANUBE AVENUE  
TAMPA, FL 33606 US

**New Mailing Address:**

609 W. AZEELE ST.  
SUITE D  
TAMPA, FL 33606 US

**FEI Number:** 27-0420666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIOVINCO, IAN S  
501 KNIGHTS RUN AVENUE  
#1234  
TAMPA, FL 33602 US

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

GIOVINCO, IAN S  
609 W. AZEELE ST.  
SUITE D  
TAMPA, FL 33606 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: IAN S. GIOVINCO

04/01/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GIOVINCO, IAN S  
Address: 501 KNIGHTS RUN AVENUE #1234  
City-St-Zip: TAMPA, FL 33602 US

Title: MGRM  
Name: BARBAS, CAMERON S  
Address: 625 DANUBE AVENUE  
City-St-Zip: TAMPA, FL 33606 US

I hereby 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: IAN S. GIOVINCO

MNGR

04/01/2010

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