4/24/2007 12:05 PM FROM: Wolfe Financial Grp Wolfe Financial Grp T

FILED
Jun 11, 2007 8:00 am
Secretary of State
06-11-2007 90108 001 ****50.00

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2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000005123

1. Entity Name
AREA 51 GRAPHICS, LLC

Principal Place of Business	Mailing Address
1717 MINNESOTA AVENUE UNIT H WINTER PARK, FL 32789	1717 MINNESOTA AVENUE UNIT H WINTER PARK, FL 32789

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4535 34 st. Ste B	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando Fl.	City & State
Zip: 32811 Country: USA	Zip Country

04242007 Chg-LLC CR2E083 (12/06)

4. FEI Number 59-3642897 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KEALEN, CHRIS 1717 MINNESOTA AVENUE UNIT H WINTER PARK, FL 32789	Name: Chris Kealen Street: 4535 34TH Street Ste B City: Orlando FL Zip Code: 32811

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 5.1.07
Signature, typed or printed name of registered agent and, if applicable, title of officer (NOTE: Registered Agent signature required when mandatory) DATE

Filing Fee is $50.00
Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing member GIORDANO, MICHAEL 807 S ORLANDO AVE., STE K WINTER PARK, FL 32789	☐ Delete	4535 34TH St. Ste A Orlando, Fl 32811	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member FRY, PHILIP 807 S ORLANDO AVE., STE K WINTER PARK, FL 32789	☐ Delete	4535 34TH St. Ste A Orlando, Fl. 32811	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Kealen, Christopher 3545 34 st. Orlando, Fl. 32811	☐ Delete	4535 34th st. Ste B Orlando, Fl 32811	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing 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 608, Florida Statutes.

SIGNATURE: _____ 5.1.07 407-647-3751
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #