2005 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L02000000135 1. Entity Name FRANK REY DANCE STUDIO LLC

FILED Feb 26, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

Mailing Address

TAMPA, FL 33614

3021 WEST WATERS AVE.

02142005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 02-0532039

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANELL, MARY FRANCES L 13325 CAIN RD. TAMPA, FL 33625 ___

Principal Place of Business___

3021 WEST WATERS AVE.

TAMPA, FL 33614

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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			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		i,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRANELL, MARY FRANCES L 13325 CAIN RD TAMPA, FL 33625		U00000244702 02/26/05-80033-001 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARKER, JEAN MARIE 2807 W. PRICE AVE UNIT 8 TAMPA, FL 33611		U2/2b/U5-8UU33-UU1 58.U8
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		— IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- -
11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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.			