

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000020058

Entity Name: ADRIANI'S BODY SHOP, LLC

**FILED**  
**Feb 28, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

5638 WEST WATERS AVENUE, BLDG. E  
TAMPA, FL 33634

**New Principal Place of Business:**

7906 ANDERSON RD  
TAMPA, FL 33634

**Current Mailing Address:**

5638 WEST WATERS AVENUE, BLDG. E  
TAMPA, FL 33634

**New Mailing Address:**

7906 ANDERSON RD  
TAMPA, FL 33634

FEI Number: 59-2730918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: ADRIANI, DAVID  
Address: 5638 W WATERS AVE BLDG E  
City-St-Zip: TAMPA, FL 33634

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ADRIANI, DAVID  
Address: 7906 ANDERSON RD  
City-St-Zip: TAMPA, FL 33634

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: DAVID ADRIANI

MGRM

02/28/2007

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