2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# L02000021672

Entity Name: STIRRIN' IT UP, LLC

Current Principal Place of Business:

319 CLEMATIS STREET #603
WEST PALM BEACH, FL 33401

New Principal Place of Business:

105 SOUTH NARCISSUS AVENUE
SUITE 512
WEST PALM BEACH, FL 33401

Current Mailing Address:

319 CLEMATIS STREET #603
WEST PALM BEACH, FL 33401

New Mailing Address:

105 SOUTH NARCISSUS AVENUE
SUITE 512
WEST PALM BEACH, FL 33401

FEI Number: 20-1173969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEBOW, PATRICIA P.A.
ONE NORTH CLEMATIS STREET, SUITE 500
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

MITCHELL-BRIDGEMAN, ANITA K
105 SOUTH NARCISSUS AVENUE
SUITE 512
WEST PALM BEACH, FL 33401 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: ANITA K MITCHELL-BRIDGEMAN 04/28/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: MITCHELL, ANITA
Address: 319 CLEMATIS STREET #603
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MITCHELL-BRIDGEMAN, ANITA K MGRM
Address: 105 SOUTH NARCISSUS AVENUE #512
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANITA K MITCHELL-BRIDGEMAN MGRM 04/28/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date