

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000032775

**FILED  
Jan 14, 2005  
Secretary of State**

**Entity Name:** RETALS LLC

**Current Principal Place of Business:**

C/O GEORGE FAMIGLIO, JR  
1634 MAIN STREET  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

C/O GEORGE FAMIGLIO, JR  
1634 MAIN STREET  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 01-0757445      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FAMIGLIO, GEORGE JR, CPA  
1634 MAIN ST  
SARASOTA, FL 34236    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/MEMBERS:**

Title: MGR      ( ) Delete  
Name: SLATER, KEN  
Address: 1634 MAIN ST  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KEN SLATER

MGR

01/14/2005

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