2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED Aug 18, 2005 08:00 AM Secretary of State DOCUMENT # L03000008707 LASZLO'S PAINTING STUDIO, LLC Principal Place of Business Mailing Address 109 GEORGE BUSH BLVD. 109 GEORGE BUSH BLVD. DELRAY BEACH, FL 33444 DELRAY BEACH, FL 33444 08132005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2347818 Not Applicable \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent THOMAS, DONALD J **DO NOT WRITE** 1200 NORTH FEDERAL HIGHWAY, SUITE 312 BOCA RATON, FL 33432 IN THIS SPACE 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 little if applicable (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by September 7, 2005 9. MANAGING MEMBERS/MANAGERS MGR U00000376639 JANOSKA, LASZLO NAU 1947 (8705-80004-004 50.00 STREET ADDRESS 109 GEORGE BUSH BLVD. CITY-ST-ZIP DELRAY BEACH, FL 33444 TITLE NAVE STREET ADDRESS CITY-ST-ZIP TILL NAME STREET ADDRESS **DO NOT WRITE** CITY-ST-ZIP MILE IN THIS SPACE NAME STREET ADDRESS CHY-ST-7IP MIL NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 1 19.07(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.

Jel-330-8-12-05 SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGN MBER, OR AUTHORIZED REPRESENTATIVE