

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015935

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: IMAGE & RETAIL SOLUTIONS, LLC

## Current Principal Place of Business:

1725 MAIN ST., STE. 205  
WESTON, FL 33326

## New Principal Place of Business:

1725 MAIN ST., STE. 209  
WESTON, FL 33326

## Current Mailing Address:

1725 MAIN ST., STE. 205  
WESTON, FL 33326

## New Mailing Address:

1725 MAIN ST., STE. 209  
WESTON, FL 33326

FEI Number: 43-2020421

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TOVAR, ILEANA ARIAS ESQ  
1725 MAIN ST., STE. 205  
WESTON TOWN CENTER  
WESTON, FL 33326

## Name and Address of New Registered Agent:

ARIAS TOVAR, ILEANA ESQ  
1725 MAIN ST., STE. 209  
WESTON TOWN CENTER  
WESTON, FL 33326

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: ILEANA ARIAS TOVAR

04/28/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: ALDREY, EDUARDO  
Address: 1725 MAIN ST., STE. 205  
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete  
Name: MACHADO, RODRIGO  
Address: 1725 MAIN ST., STE. 205  
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete  
Name: LILIAN GRETTEL DOHSE, PANTIN  
Address: 1725 MAIN ST., STE. 205  
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete  
Name: QUINTERO, ANTONIO  
Address: 1725 MAIN ST., STE. 205  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES:

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

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

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

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: EDUARDO ALDREY

MGR

04/28/2004

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