

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Mar 22, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000021272

1. Entity Name
BULLSEYE, LLC



Principal Place of Business 19640 WEST SAINT ANDREWS DRIVE MIAMI, FL 33015	Mailing Address 19640 WEST SAINT ANDREWS DRIVE MIAMI, FL 33015
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01132006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 90-0089872	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**KING, EDWARD
19640 WEST SAINT ANDREWS DRIVE
MIAMI, FL 33015**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by May 1, 2006

1100000477613
04/06/06-80058-007 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KING, EDWARD 19640 WEST SAINT ANDREWS DRIVE MIAMI, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADAMS, RICHARD B 19640 WEST SAINT ANDREWS DRIVE MIAMI, FL 33015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Edward King, Managing Member **3/20/2006** **954-232-3056**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #