2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP TITLE NAME STREET ADDRESS City-ST-ZIP

FILED Feb 11, 2005 08:00 AM Secretary of State DOCUMENT # L03000021383 BAM CREATIONS, LLC Principal Place of Business Mailing Address 5711 PADGETT CIR. 5711 PADGETT CIR. ORLANDO, FL 32839 ORLANDO, FL 32839 01212005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MILLER, BARBARA A DO NOT WRITE 5711 PADGETT CIR. ORLANDO, FL 32839 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, typed or printed name of registered agent and title if applicable DATE (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGR TITLE MILLER, BARBARA NAME STREET ADDRESS 5711 PADGETT CIR. U000000225768 CITY-ST-ZIP ORLANDO, FL 32839 02/11/05-80056-002 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TiTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under eath; 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.