2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 17, 2005
Secretary of State

DOCUMENT# L03000024902

Entity Name: COLOR YOU, LLC

Current Principal Place of Business:

950 FAIRBANKS AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

950 FAIRBANKS AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-0079920 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SIK, EVA MGR
950 FAIRBANKS AVE
WINTER PARK, FL 32789 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/MANAGERS:

Title: MGR ( ) Delete
Name: SIK, EVA
Address: 950 FAIRBANKS AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: MGR (X) Delete
Name: SIK, PETER
Address: 950 FAIRBANKS AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: MGR (X) Delete
Name: SIK, EVA
Address: 950 FAIRBANKS AVENUE
City-St-Zip: WINTER PARK, FL 32789

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:

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: EVA SIK MGR 08/17/2005

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