

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038109

Entity Name: NAKEDCONCIERGE.COM, LLC

FILED
Mar 19, 2005
Secretary of State

Current Principal Place of Business:

P.O. BOX 288
KEY WEST, FL 33041

New Principal Place of Business:

3250 NORTH PALM AIRE DRIVE
#405
POMPANO BEACH, FL 33069

Current Mailing Address:

P.O. BOX 288
KEY WEST, FL 33041

New Mailing Address:

3250 NORTH PALM AIRE DRIVE
#405
POMPANO BEACH, FL 33069

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 E. JEFFERSON ST.
TALLAHASSEE, FL 32301 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/MEMBERS:

Title: MGR () Delete
Name: COLLINS, DAVID
Address: P.O. BOX 288
City-St-Zip: KEY WEST, FL 33041 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COLLINS, DAVID
Address: 3250 NORTH PALM AIRE DRIVE #405
City-St-Zip: POMPANO BEACH, FL 33069 US

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: DAVID COLLINS

MGR

03/19/2005

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