

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056337

FILED
Feb 21, 2007
Secretary of State

Entity Name: PUT YOUR NAME ON IT! LLC

Current Principal Place of Business:

16057 TAMPA PALMS BLVD., WEST
SUITE 418
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

16057 TAMPA PALMS BLVD., WEST
SUITE 418
TAMPA, FL 33647

New Mailing Address:

FEI Number: 34-1976866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHN, NANCY
16321 HEATHROW DRIVE
TAMPA, FL 33647 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: KAHN, NANCY
Address: 16321 HEATHROW DRIVE
City-St-Zip: TAMPA, FL 33647 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KAHN, NANCY
Address: 16321 HEATHROW DRIVE
City-St-Zip: TAMPA, FL 33647 US

Title: MGR () Change (X) Addition
Name: KAHN, M.
Address: 16321 HEATHROW DRIVE
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: NANCY KAHN

MGRM

02/21/2007

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