

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 09, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000008329**

1. Entity Name  
**PARIS MANHATTAN COLOR LLC**



Principal Place of Business  
**108-D LIGHTHOUSE CIRCLE  
TEQUESTA, FL 33469**

Mailing Address  
**P.O. BOX 4151  
TEQUESTA, FL 33469**



01062006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**50-0007031**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**JOHNSON, MURIELLE  
108-D LIGHTHOUSE CIRCLE  
TEQUESTA, FL 33469**

**DO NOT WRITE  
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.

000000379841

01/10/06-80039-011 50.00

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
JOHNSON, MURIELLE  
108 D LIGHTHOUSE CIRCLE  
TEQUESTA, FL 33469**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**MURIELLE JOHNSON**

**1/06/06**

**561.748 1669**

Date

Daytime Phone #