

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013519

Entity Name: OOH LA LA, LLC

FILED
Feb 17, 2005
Secretary of State

Current Principal Place of Business:

1783 VICTORIA POINTE CIRCLE
WESTON, FL 33327 US

New Principal Place of Business:

1224 PEREGRINE WAY
WESTON, FL 33327 US

Current Mailing Address:

1783 VICTORIA POINTE CIRCLE
WESTON, FL 33327 US

New Mailing Address:

1224 PEREGRINE WAY
WESTON, FL 33327 US

FEI Number: 51-0497177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSENBLOOM, ROBYN L
1783 VICTORIA POINTE CIRCLE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

EPSTEIN, ERICA H MS.
1224 PEREGRINE WAY
WESTON, FL 33327 US

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: ERICA H. EPSTEIN

02/17/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ROSENBLOOM, ROBYN L
Address: 1783 VICTORIA POINTE CIRCLE
City-St-Zip: WESTON, FL 33327 US

Title: MGR () Delete
Name: BIEBER, WENDI G
Address: 1224 PEREGRINE WAY
City-St-Zip: WESTON, FL 33327 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EPSTEIN, ERICA H
Address: 1224 PEREGRINE WAY
City-St-Zip: WESTON, FL 33327 US

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: ERICA H. EPSTEIN

MGRM

02/17/2005

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