

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038545

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: FINE ART ACQUISITIONS L.L.C.

**Current Principal Place of Business:**

2470 S.E. FEDERAL HIGHWAY  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

2470 S.E. FEDERAL HIGHWAY  
STUART, FL 34994 US

**New Mailing Address:**

FEI Number: 38-3702644

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WEINER, SUSAN  
1515 SOUTH FLAGLER DRIVE  
#501  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

WEINER, SUSAN  
3497 S. E. JENNINGS LANE  
STUART, FL 34997 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: SUSAN WEINER

04/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEINER, SUSAN  
Address: 2470 S.E. FEDERAL HIGHWAY  
City-St-Zip: STUART, FL 34994

Title: MGRM ( ) Delete  
Name: GEMMI, PETER  
Address: 2470 S.E. FEDERAL HIGHWAY  
City-St-Zip: STUART, FL 34994 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: GEMMI, PETER  
Address: 3497 S.E. JENNINGS LANE  
City-St-Zip: STUART, FL 34997 US

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN WEINER

MGRM

04/27/2007

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