

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040576

FILED
May 01, 2008
Secretary of State

Entity Name: ERIC VICTOR FRAMING, LLC

Current Principal Place of Business:

400
NORWOOD AVE
SATELLITE BCH, FL 32937 US

New Principal Place of Business:

121 RYAN CT.
OAKLAND, FL 34760 US

Current Mailing Address:

400 NORWOOD AVE
SATELLITE BEACH, FL 32937 US

New Mailing Address:

P.O. BOX 84
OAKLAND, FL 34760 US

FEI Number: 81-0639394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BURNS, AMANDA
13028 WEST COLONIAL DRIVE
WINTER GARDEN, FL 34787 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: VICTOR, ERIC
Address: 400 NORWOOD AVE
City-St-Zip: SATELLITE BCH, FL 32937

Title: MGRM () Delete
Name: VICTOR, TASHA
Address: 400 NORWOOD AVE
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VICTOR, ERIC
Address: 121 RYAN CT.
City-St-Zip: OAKLAND, FL 34760

Title: MGRM (X) Change () Addition
Name: VICTOR, TASHA
Address: 121 RYAN CT.
City-St-Zip: OAKLAND, FL 34760

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: TASHA VICTOR

MGRM

05/01/2008

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