2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2005
Secretary of State

DOCUMENT# L04000041941

Entity Name: THOMSON IMAGING SERVICES, LLC

Current Principal Place of Business:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 33-1095019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART AGENT SERVICES
2199 PONCE DE LEON BOULEVARD
SUITE 301
CORAL GABLES, FL 33134 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/MEMBERS:

Title: MGR ( ) Delete
Name: STINSON, LOUIS JR.
Address: 2199 PONCE DE LEON BOULEVARD, SUITE 301
City-St-Zip: CORAL GABLES, FL 33134 US

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

Title: ( ) Delete
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City-St-Zip:

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

ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition
Name: HELLMUND, CARLOS E SR
Address: APARTADO 589
City-St-Zip: CARACAS, VE 1010-A VE

Title: MGR ( ) Change (X) Addition
Name: HELLMUND, RICARDO
Address: 4210 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33146 US

Title: MGR ( ) Change (X) Addition
Name: HELLMUND, CARLOS JR
Address: 4210 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33146 US

Title: MGR ( ) Change (X) Addition
Name: SILEN, HECTOR
Address: 4210 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33146 US

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: LOUIS STINSON, JR. MGR 03/22/2005

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