

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047144

Entity Name: IMAGINE MY ANGELS, LLC

FILED
Aug 24, 2005
Secretary of State

Current Principal Place of Business:

5790 SW 97TH STREET
C/O BARBARA CEULEERS SALAZAR
PINECREST, FL 33156

New Principal Place of Business:

Current Mailing Address:

5790 SW 97TH STREET
C/O BARBARA CEULEERS SALAZAR
PINECREST, FL 33156

New Mailing Address:

1001 BRICKELL BAY DRIVE, 9TH FLOOR
C/O MIGUEL G. FARRA
MIAMI, FL 33131

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

FARRA, MIGUEL G ESQ
MORRISON, BROWN, ARGIZ & FARRA, LLP
1001 BRICKELL BAY DRIVE, STE. 900
MIAMI, FL 33131 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: MGRM () Delete
Name: CEULEERS SALAZAR, BARBARA
Address: 5790 SW 97TH STREET
City-St-Zip: PINECREST, FL 33156

ADDITIONS/CHANGES:

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: BARBARA C. SALAZAR

MGRM

08/24/2005

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