

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054964

FILED  
Mar 21, 2005  
Secretary of State

**Entity Name:** SPACE BLASTERS MOONWALKS & PARTY SUPPLIES, LLC

**Current Principal Place of Business:**

2401 SETTLERS TRAIL  
ST. CLOUD, FL 34772 US

**New Principal Place of Business:**

1680 SUNDANCE DRIVE  
ST. CLOUD, FL 34771 US

**Current Mailing Address:**

2401 SETTLERS TRAIL  
ST. CLOUD, FL 34772 US

**New Mailing Address:**

1680 SUNDANCE DRIVE  
ST. CLOUD, FL 34771 US

**FEI Number:** 20-1459710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEGALZOOM NEVADA, INC.  
44 W. FLAGLER ST.  
SUITE 675  
MIAMI, FL 33130 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: MGRM ( ) Delete  
Name: GIBSON, SCARLET K  
Address: 2401 SETTLERS TRAIL  
City-St-Zip: ST. CLOUD, FL 34772 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GIBSON, SCARLET K  
Address: 1680 SUNDANCE DRIVE  
City-St-Zip: ST. CLOUD, FL 34771 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: SCARLET K. GIBSON

MRS.

03/21/2005

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