

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072153

Entity Name: LABELS ONLINE, LLC

FILED  
Jan 29, 2007  
Secretary of State

## Current Principal Place of Business:

16300 NE 19TH AVENUE  
SUITE 212  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

## Current Mailing Address:

16300 NE 19TH AVENUE  
SUITE 212  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

FEI Number: 84-1659208

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COHEN, MICHEL  
16300 NE 19TH AVENUE  
SITE 212  
NORTH MIAMI BEACH, FL 33162 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: GOLDBERG, ABRAHAM  
Address: 16300 NE 19TH AVENUE, STE 212  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGR ( ) Delete  
Name: COHEN, MICHEL  
Address: 16300 NE 19TH AVENUE, STE 212  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGR ( ) Delete  
Name: COHEN, RAFAEL  
Address: 16300 NE 19TH AVENUE, STE 212  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGR ( ) Delete  
Name: COHEN, CAROLA  
Address: 16300 NE 19TH AVENUE, STE 212  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES:

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

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

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

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 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: MICHEL COHEN

MGR

01/29/2007

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