

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072337

Entity Name: AEGIS MARKETING, LLC

FILED  
May 13, 2005  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 223495  
HOLLYWOOD, FL 33022

## New Principal Place of Business:

19111 COLLINS AVENUE  
1807  
SUNNY ISLES, FL 33160

## Current Mailing Address:

P.O. BOX 223495  
HOLLYWOOD, FL 33022

## New Mailing Address:

19111 COLLINS AVENUE  
1807  
SUNNY ISLES, FL 33160

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:

OLENJOICZAK, ELIZABETH  
P.O. BOX 223495  
HOLLYWOOD, FL 33022 US

## Name and Address of New Registered Agent:

LAMONT NEIMAN INTERIAN & BELLET, P.A.  
2 S. BISCAYNE BLVD.  
3550  
MIAMI, FL 33131 US

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: JAN S. NEIMAN, ESQ.

05/13/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

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

## ADDITIONS/CHANGES:

Title: MNGR ( ) Change (X) Addition  
Name: PIPPO, GREGORY MNGR  
Address: 19111 COLLINS AVENUE, # 1807  
City-St-Zip: SUNNY ISLES, FL 33160

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: GREGORY PIPPO

MNGR

05/13/2005

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