2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000086065

1. Entity Name
HYPNOSIS EVENTS, LLC

Principal Place of Business	Mailing Address
4034 MERMOOR COURT PALM HARBOR, FL 34685	4034 MERMOOR COURT PALM HARBOR, FL 34685

DO NOT WRITE IN THIS SPACE

01272007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
65-1237517	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LYONS, GARY W ESQ.
311 SOUTH MISSOURI AVE.
CLEARWATER, FL 33756

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

000000614320
02/06/07-80020-025 50.00

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	KAND, ERICK
STREET ADDRESS	4034 MERMOOR COURT
CITY-ST-ZIP	PALM HARBOR, FL 34685
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ Erick Kand, Manager   01/27/07 (727)403-0639
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #