## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Jan 19, 2007 08:00 AM Secretary of State DOCUMENT # L04000088935 FEDÉRATION MODELS, LLC Principal Place of Business Mailing Address 1332 MALABAR ROAD SOUTHEAST 1332 MALABAR ROAD SOUTHEAST PALM BAY, FL 32907 PALM BAY, FL 32907 01092007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-3570180 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BROWNFIELD, TRACY** DO NOT WRITE 554 CACTI CT. PALM BAY, FL 32907 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 (NOTE. Registered Agent signature required when reinstating) Filing Fee is \$50.00 01/22/07-80028-001 50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME **BROWNFIELD, TRACY** STREET ADDRESS 554 CACTI CT. CITY-ST-ZIP **PALM BAY, FL 32907** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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: SUSANDER AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

1/16/07 321-409-9465