2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045074

Entity Name: IT'S MY PARTY, LLC

FILED Jan 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 ACADEMY DRIVE 810 HAVEN OAK CT ALTAMONTE SPRINGS, FL 32714 APOPKA, FL 32703

Current Mailing Address: New Mailing Address:

1200 ACADEMY DRIVE 810 HAVEN OAK CT ALTAMONTE SPRINGS, FL 32714 APOPKA, FL 32703

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

LEDESMA, MARLISSA
1200 ACADEMY DRIVE
ALTAMONTE SPRINGS, FL 32714 US
LEDESMA, MARLISSA
810 HAVEN OACK CT
APOPKA, FL 32703 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: 01/26/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 LEDESMA, MARLISSA
 Name:
 LEDESMA, MARLISSA

 Address:
 1200 ACADEMY DRIVE
 Address:
 810 HAVEN OAK CT

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714
 City-St-Zip:
 APOPKA, FL 32703

Title: MGRM () Delete Title: () Change () Addition

 Name:
 KELLER, JOANNE
 Name:

 Address:
 1200 ACADEMY DRIVE
 Address:

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714
 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: MARLISSA LEDESMA MGRM 01/26/2006