
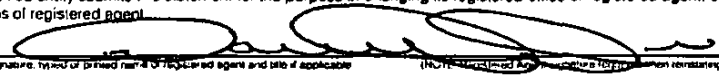
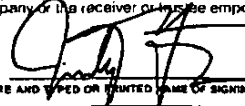


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
1/ Feb 20, 2006 8:00 am
Secretary of State

01-20-2006 90052 023 ****50.00

DOCUMENT # L05000059672			
1. Entity Name IMAGINATIVE TOUCH STUDIOS LLC			
Principal Place of Business 4221 WEST SPRUCE STREET UNIT 1108 TAMPA, FL 33607 US		Mailing Address 4221 WEST SPRUCE STREET UNIT 1108 TAMPA, FL 33607 US	
2. Principal Place of Business SAME		3. Mailing Address SAME	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-300-1874		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required <input type="checkbox"/>	
6. Name and Address of Current Registered Agent ANTONAKAKIS, DEMETRI G 15416 PLANTATION OAKS DRIVE APARTMENT 10 TAMPA, FL 33647		7. Name and Address of New Registered Agent Name DARREN DE VRIES Street Address (P.O. Box Number is Not Acceptable) 15416 PLANTATION OAKS DR. APT 10 City TAMPA FL Zip Code 33647	
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  DATE 1/16/06			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM FARANO, JUSTYN N 4221 WEST SPRUCE STREET UNIT 1108 TAMPA, FL 33607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  DATE 1/16/06 813-569-4272 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			

30000665





ATTACHMENT
30000605

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2006

IMAGINATIVE TOUCH STUDIOS LLC
4221 WEST SPRUCE STREET
UNIT 1108
TAMPA, FL 33607 US

Subject: IMAGINATIVE TOUCH STUDIOS LLC

Reference Number: L05000059672

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE

ANNUAL REPORTS SECTION