

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062691

Entity Name: INK HOLDINGS, LLC

FILED
Aug 28, 2007
Secretary of State

Current Principal Place of Business:

221 JEFFERSON AVE.
#4
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

221 JEFFERSON AVE.
#4
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-3049388 FEI Number Applied For () FEI Number Not Applicable () 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:

Name and Address of New Registered Agent:

CAESAR, MARK A
221 JEFFERSON AVE.
#4
MIAMI BEACH, FL 33139 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAESAR, MARK A
Address: 21 JEFFERSON AVE., #4
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: BLATNIK, IGOR
Address: 227 SUMMIT AVE.
City-St-Zip: BROOKLINE, MA 02446

Title: MGRM () Delete
Name: KALPAKE, CONSTANTINE
Address: 1260 WASHINGTON BLVD. #504
City-St-Zip: CHICAGO, IL 60607

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARK CAESAR

MGMR

08/28/2007

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