

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075150

FILED
Mar 09, 2006
Secretary of State

Entity Name: WRAPTURES - THE BODY SALON, LLC

Current Principal Place of Business:

195 B AVENUE D NW
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

5013 RIVER LAKE RD
WINTER HAVEN, FL 33884 US

New Mailing Address:

195 AVENUE D NW
WINTER HAVEN, FL 33881 US

FEI Number: 20-3233000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOORE, ROBIN P
5013 RIVER LAKE RD
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

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: MOORE, ROBIN P
Address: 5013 RIVER LAKE RD
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: MGRM () Delete
Name: BIRD, SUZANNE
Address: 2105 JONATHAN LN
City-St-Zip: WINTER HAVEN, FL 33884 US

ADDITIONS/CHANGES:

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 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: ROBIN P MOORE

MGRM

03/09/2006

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