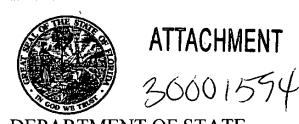
## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Mar 02, 2006 8:00 am Secretary of State **DOCUMENT #L05000095935** 01-13-2006 90038 049 \*\*\*\*50.00 1. Entity Name MICHELE'S PHOTO RESTORATIONS L.L.C. Principal Place of Business Mailing Address 3423 E SILVER SPRINGS BLVD OCALA, FL. 34470 BOX 830631 30001594 OCALA, FL. 34483-0631 2. Principal Place of Business 3. Masing Address Suite, Apt. 9, etc. Suite, Ant. 6, etc. 01092008 CR2E083 (11/05) Applied For City & State City & State Not Applicat Country \$5.00 Additional Fee Required e and Address of Current Registered Agent RADANEK MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 4221 SE 46TH ST OCALA, FL 34480 Cev Zip Code 8. The above named éntity éubmits this statement for the purpose of changing as registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES Manager Jeanne Simmuns Box 830631 34483 MLE □ pdes mu KAME HAME STREET ADDRESS STREET ACCRESS CITY-53-29 CT1-53-29 ocala FLorid ग्रास O Dates TILE Change Addition 100.00 STREET ADDRESS STREET ADDRESS CTT-ST-27 077-53-29 mre mı ☐ Addison STREET ADDRESS STREET ACCINESS CTTY - 57 - 72 CT7 - S1 - JP माLE TITLE O Delete Change Addition STREET ACCUSES CITY - 57 - 27 C17-51-2P TILE. TITLE Change Addition -STREET ADORES STICLET ACCORDS OTT-51-79 Q1Y-\$1-2P MILE D Detail HILL H Camps Addition MARE NAME STREET ADDRESS SZRETT ADDRESS CITY-\$1-ZP CTTY - ST- 2P Ging does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information my signature shall have the zame legal effect as if made under copy; that I am a managing member or member of the

1/

**FILED** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 13, 2006

MICHELE"S PHOTO RESTORATIONS L.L.C. BOX 830631 OCALA, FL 34483-0631

Subject: MICHELE'S PHOTO RESTORATIONS L.L.C.

Reference Number:

L05000095935

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> 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

FEIN# 56-2537629

2/27/2006

P.O. BOX 6478 - Tallahassee, Florida 32314

Roystered Agent



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 18, 2006

MICHELE"S PHOTO RESTORATIONS L.L.C. BOX 830631 OCALA, FL 34483-0631

Subject: MICHELE'S PHOTO RESTORATIONS L.L.C.

Reference Number:

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

List the complete title, name, street address, city, state and zip code of each manager, managing member or principal of the limited liability company.

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