

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105628

FILED
Apr 11, 2007
Secretary of State

Entity Name: THE ELEGANT SCHOOL OF MODERN DANCE, LLC

Current Principal Place of Business:

10022 W MCNAB ROAD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

7900 SOUTH COLONY CIRCLE
UNIT 110
TAMARAC, FL 33321

New Mailing Address:

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

Name and Address of Current Registered Agent:

HALL, SHAWNA L
7900 SOUTH COLONY CIRCLE
UNIT 110
TAMARAC, FL 33321 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: HALL, SHAWNA L
Address: 7900 SOUTH COLONY CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: MGRM () Delete
Name: TRININGHAM, KIMBERLY
Address: 87 CAROL LANE
City-St-Zip: POUGHQUAG, NY 12570

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: TRIMINGHAM, KIMBERLY
Address: 87 CAROL LANE
City-St-Zip: POUGHQUAG, NY 12570

Title: MGR () Change (X) Addition
Name: SHAWNA L HALL,
Address: 7900 S COLONY CIRCLE UNIT #110
City-St-Zip: TAMARAC, FL 33321 BR

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: SHAWNA L HALL

MGR

04/11/2007

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