FILED Mar 09, 2006 8:00 am Secretary of State 01-25-2006 90050 023 ****50.00

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000111223 1. Entity Name PROMOTIONS AND INNOVATIONS, LTD. CO.								90030		30.00
Principal Place 970 SMOKER PORT ORANG	USE BLVD.		Mailing Address 970 SMOKERISE BLVD. PORT GRANGE, FL 32127			30001997				
2. Principal P	tace of Busin	CS8	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #. etc.			01102006	Chg-LLC	CR2E08	3 (11/05)	
City & State			City & State			4 FEI Numb	05765	-9/	<u> </u>	peed For
Zτρ		Country	Zip	Cour	try	5. Certificat	of Status Desired	п \$	5.00 Add	itional
6. Name and Address of Current F						7. Name and Address of New Registered Agent				
FLORIO, D 970 SMOK PORT OR	(ERISE BI		Name Street Address (P.O. Box Number is Not Acceptable)							
					City			FL	Zip Code	•
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 Someon, typed or private name of registered agent and stell applicable. (NOTE: Registered Agent stoneure required when refreshing) DATE										
	iling Pee				•			ke check pa la Departme		•
9.		MANAGING MEMBE		10.			ADDITIONS	/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	970 SMO	DANIEL E KERISE BLVD. RANGE, FL 32127	Deteta		- 1			I	Change	☐ Adultion
TITLE HAME STREET ADDRESS CITY-ST-ZIP		KAY F KERISE BLVD. RANGE, FL 32127	☐ Ocieta		- 1				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Deleto						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Deleta		E E EET ADORESS 1-ST-ZIP			ı	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Daleta				-	(Change	Addition
TITLE MANE STREET ADDRESS CITY-ST-ZIP	_		☐ Ociena			-	-		Change	☐ Addition
Indicated	d on this report ability comple	ort is true and accurate and any or the receiver or truste	th this filing does not qualify in that my signature shall have be empowered to execute this	the same report a	e legal effect as if a required by Cha	made under og pter 608, Florida	th; that I am a mana	further certify t iging member	or manage	rmation of the



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2006

PROMOTIONS AND INNOVATIONS, LTD. CO. 970 SMOKERISE BLVD. PORT ORANGE, FL 32127

Subject: PROMOTIONS AND INNOVATIONS, LTD. CO.

Reference Number:

L05000111223

se rectioned

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