

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000015102

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** NEW IMAGE POINT OF SALE LLC

**Current Principal Place of Business:**

4370 OAKES ROAD  
SUITE 726  
DAVIE, FL 33314 US

**New Principal Place of Business:**

**Current Mailing Address:**

4370 OAKES ROAD  
SUITE 726  
DAVIE, FL 33314 US

**New Mailing Address:**

**FEI Number:** 20-4293327

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GANCI, PAUL  
13808 SW 42 STREET  
DAVIE, FL 33330 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  
**Name:** GANCI, PAUL  
**Address:** 13808 SW 42 STREET  
**City-St-Zip:** DAVIE, FL 33330 US

**Title:** MGRM  
**Name:** GANCI, CIRO JR  
**Address:** 4941 SW 88 TERRACE  
**City-St-Zip:** COOPER CITY, FL 33328 US

**Title:** MGRM  
**Name:** GANCI, JOSEPH  
**Address:** 9310 OAKS GROVE CIRCLE  
**City-St-Zip:** DAVIE, FL 33328 US

I hereby 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:** PAUL GANCI

MGRM

01/11/2010

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