

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034284

FILED
Mar 17, 2007
Secretary of State

Entity Name: STRIKING IMAGES, L.L.C.

Current Principal Place of Business:

18209 SANDY PINE CIRCLE
N. FORT MYERS, FL 33917

New Principal Place of Business:

Current Mailing Address:

18209 SANDY PINE CIRCLE
N. FORT MYERS, FL 33917

New Mailing Address:

FEI Number: 02-0773390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, CHRISTINE F ESQ
4427 S.E. 16TH PLACE, #2
CAPE CORAL, FL 33904 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: LANG, MELINDA
Address: 18209 SANDY PINE CIRCLE
City-St-Zip: N. FORT MYERS, FL 33917

Title: MGRM () Delete
Name: LANG, AARON
Address: 18209 SANDY PINE CIRCLE
City-St-Zip: N. FORT MYERS, FL 33917

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: MELINDA L LANG

MGRM

03/17/2007

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