

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000050209

Entity Name: ALIEN ARTIFACTS LLC

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2244 MORNINGSIDE DR  
CLEARWATER, FL 33764

**New Principal Place of Business:**

1727 COACHMAN PLAZA DR  
SUITE 100  
CLEARWATER, FL 33759

**Current Mailing Address:**

2244 MORNINGSIDE DR  
CLEARWATER, FL 33764

**New Mailing Address:**

FEI Number: 20-4880709

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELLOISE, ANDRE OWNER  
2244 MORNINGSIDE DR  
CLEARWATER, FL 33764 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: MGR  
Name: BELLOISE, ANDRE  
Address: 2244 MORNINGSIDE DR  
City-St-Zip: CLEARWATER, FL 33764

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: ANDRE BELLOISE

MR

02/07/2011

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