

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000057434

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** ESCAPADES FITNESS SPA & SALON NEW TAMPA LLC

**Current Principal Place of Business:**

10701 CROSS CREEK BLVD  
TAMPA, FL 33647 US

**New Principal Place of Business:**

27724 CASHFORD CIRCLE  
TAMPA, FL 33543 US

**Current Mailing Address:**

9212 OAK PRIDE COURT  
TAMPA, FL 33647 US

**New Mailing Address:**

**FEI Number:** 51-0592402      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PRYOR, ELIZABETH J  
9212 OAK PRIDE COURT  
TAMPA, FL 33647 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 ( ) Delete  
Name: PRYOR, RYAN A  
Address: 9212 OAK PRIDE COURT  
City-St-Zip: TAMPA, FL 33647 US

Title: MGR ( ) Delete  
Name: PRYOR, ELIZABETH J  
Address: 9212 OAK PRIDE COURT  
City-St-Zip: TAMPA, FL 33647 US

**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 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: RYAN PRYOR

MR

04/30/2007

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