

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071460

FILED
Jul 30, 2007
Secretary of State

Entity Name: COLOR GLO OF TAMPA BAY INC, LLC

Current Principal Place of Business:

469 ISLAND WAY
CLEARWATER, FL 33767 US

New Principal Place of Business:

1540 RIVERSIDE DRIVE
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

469 ISLAND WAY
CLEARWATER, FL 33767 US

New Mailing Address:

1540 RIVERSIDE DRIVE
TARPON SPRINGS, FL 34689 US

FEI Number: 20-5220374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MYATT-PEARSON, STEPHEN
469 ISLAND WAY
CLEARWATER, FL 33767 US

Name and Address of New Registered Agent:

MYATT-PEARSON, STEPHEN
1540 RIVERSIDE DRIVE
TARPON SPRINGS, FL 34689 US

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: STEPHEN MYATT-PEARSON

07/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MYATT-PEARSON, STEPHEN
Address: 469 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MYATT-PEARSON, STEPHEN
Address: 1540 RIVERSIDE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

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: STEPHEN MYATT-PEARSON

MGR

07/30/2007

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