

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Sep 10, 2007 8:00 am**  
**Secretary of State**

09-10-2007 90103 023 \*\*\*\*50.00

<b>DOCUMENT # L06000085736</b>					
<b>1. Entity Name</b> ERIC B. WELLS PHOTOGRAPHY, LLC					
<b>Principal Place of Business</b> 2008 JACKSON STREET C1 HOLLYWOOD, FL 33020			<b>Mailing Address</b> 2008 JACKSON STREET C1 HOLLYWOOD, FL 33020		
<b>2. Principal Place of Business - No P.O. Box #</b> 1931 SE 18th St.		<b>3. Mailing Address</b> 1931 SE 18th St.			
Suite, Apt. #, etc. Pompano Beach, FL		Suite, Apt. #, etc. Pompano Beach, FL			
City & State		City & State			
Zip 33062	Country USA	Zip 33062	Country USA	09062007 Chg-LLC CR2E083 (12/06)	
<b>6. Name and Address of Current Registered Agent</b> WELLS, ERIC B 2008 JACKSON STREET C1 HOLLYWOOD, FL 33020				<b>7. Name and Address of New Registered Agent</b> Name <u>ERIC B. WELLS</u> Street Address (P.O. Box Number is Not Acceptable) <u>1931 SE 18th St.</u> City <u>Pompano Beach</u> FL <u>33062</u>	
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b> SIGNATURE <u>[Signature]</u> DATE <u>9/6/2007</u>					
<b>Filing Fee is \$50.00</b> <b>Due by September 14, 2007</b>			<b>Make check payable to</b> <b>Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WELLS, ERIC B 2008 JACKSON STREET, C1 HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete			
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<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.</b>			SIGNATURE <u>[Signature]</u> DATE <u>9/6/2007</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		