

FILED
May 03, 2007 8:00 am
Secretary of State

04-19-2007 90040 039 ****50.00

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2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L06000103401			
1. Entity Name SMOOTH TAN LLC			
Principal Place of Business 8967 RALETRACK RD STE 202 TAMPA, FL 33615		Mailing Address 7000 PARK BLVD PINELLAS PARK, FL 33781	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent POWNALL, RONALD 7000 PARK BLVD. PINELLAS PARK, FL 33781		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. SIGNATURE _____ (NOTE: Registered Agent's signature required when re-stating) Filing Fee is \$50.00 Due by May 1, 2007			
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM POWNALL, RONALD 7000 PARK BLVD. PINELLAS PARK, FL 33781 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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. SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #			

30006719



04132007 Chg-LLC CR2E083 (12/06)

4. FEI Number **20-5730838** Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required