

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111787

FILED
Apr 11, 2007
Secretary of State

Entity Name: PAINT THE NIGHT MONET, LLC

Current Principal Place of Business:

800 NE 195TH STREET
310
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

800 NE 195TH STREET
310
MIAMI, FL 33179

New Mailing Address:

FEI Number: 20-5912322 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SORCE, JOSEPH A
3211 PONCE DE LEON BLVD.
200
CORAL GABLES, FL 33134 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 (X) Delete
Name: SMITH, CARROLL W
Address: 800 NE 195TH STREET # 310
City-St-Zip: MIAMI, FL 33179

Title: MGR () Delete
Name: JIM MORRISON PRODUCT, IONS, INC.
Address: 800 NE 195TH STREET #310
City-St-Zip: MIAMI, FL 33179

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 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: JAMES M. MORRISON

PRES

04/11/2007

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