

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


**FILED**  
**Jul 14, 2008 8:00 am**  
**Secretary of State**

07-14-2008 90098 041 \*\*\*138.75

**60044760**

**(L07000010711C)**

07042008 Chg-LLC CR2E083 (12/06)

<b>DOCUMENT # L07000010711</b>					
1. Entity Name <b>SOLO STUDIO LLC</b>					
Principal Place of Business <b>7280 W PALMETTO PARK RD, STE 202-N BOCA RATON, FL 33433 US</b>			Mailing Address <b>7280 W PALMETTO PARK RD, STE 202-N BOCA RATON, FL 33433 US</b>		
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	4. FEI Number <b>20-8406141</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>HERNANDEZ, HOMAR JR. 2065 SW 22 AVENUE CIRCLE BOCA RATON, FL 33486</b>			7. Name and Address of New Registered Agent Name <b>HERNANDEZ, HOMAR JR</b> Street Address (P.O. Box Number Is Not Acceptable) <b>7280 W PALMETTO PARK RD</b> <b>STE 202-N</b> City <b>BOCA RATON</b> <b>FL</b> Zip Code <b>33433</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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-installing)

DATE

**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HERNANDEZ, HOMAR JR 2065 SW 22 AVENUE CIRCLE BOCA RATON, FL 33486	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERNANDEZ, HOMAR JR 7280 W PALMETTO PARK RD STE 202-N BOCA RATON, FL 33433	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 #

*7/10/08*