2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 06, 2008
Secretary of State

DOCUMENT# L07000025150

Entity Name: ANTIQUE EVANESENCE, LLC

Current Principal Place of Business:

4371 LAKE BLVD
340
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4371 LAKE BLVD
340
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

TRACY LAW FIRM, PA
1511 PROSPERITY FARMS RD
100
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

TRACY LAW FIRM, PA
1511 PROSPERITY FARMS RD
300
LAKE PARK, FL 33403 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: 06/06/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: CONNOR, JOHN
Address: C/O TRACY 1511 PROSPERITY FARMS RD STE 300
City-St-Zip: LAKE PARK, FL 33403

Title: MGRM ( ) Change (X) Addition
Name: CONNOR, JONEEN
Address: C/O TRACY 1511 PROSPERITY FARMS RD STE 300
City-St-Zip: LAKE PARK, FL 33403

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: J STEPHEN TRACY ATTY 06/06/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date