

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000058728

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** DRAPERY SOLUTIONS LLC

**Current Principal Place of Business:**

7072 VESUVIO PLACE  
BOYNTON BEACH, FL 334373746 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 740281  
BOYNTON BEACH, FL 33474 US

**New Mailing Address:**

**FEI Number:** 26-0292056

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLOOMSTON, MARSHALL  
7072 VESUVIO PLACE  
BOYNTON BEACH, FL 334373746 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  
**Name:** ELLMAN, JOSEPH  
**Address:** 700 EAST BOYNTON BEACH BLVD# 704  
**City-St-Zip:** BOYNTON BEACH, FL 33435 US

**Title:** MGR  
**Name:** BLOOMSTON, MARSHALL  
**Address:** 7072 VESUVIO PLACE  
**City-St-Zip:** BOYNTON BEACH, FL 334373746 US

I hereby 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:** MARSHALL BLOOMSTON

MGR

02/17/2012

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