

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000102541

**FILED**  
**Apr 08, 2012**  
**Secretary of State**

**Entity Name:** PEAK IMPRESSIONS, LLC

**Current Principal Place of Business:**

120 S.W. 101 AVENUE  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

120 S.W. 101 AVENUE  
PLANTATION, FL 33324 US

**New Mailing Address:**

**FEI Number:** 26-1267443      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BRATT, IRVING M  
120 S.W. 101 AVENUE  
PLANTATION, FL 33324 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:** MGRM  
**Name:** BRATT, IRVING M  
**Address:** 120 S. W. 101 AVENUE  
**City-St-Zip:** PLANTATION, FL 33324 US

**Title:** MGRM  
**Name:** POULIOT, REYNALD  
**Address:** 3100 N. OCEAN BLVD, #1608  
**City-St-Zip:** FT. LAUDERDALE, FL 33308 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:** IRVING BRATT

MGRM

04/08/2012

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