

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025966

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** MAJA HOFFNER PHOTOGRAPHY, LLC

**Current Principal Place of Business:**

4632 N ANDREWS AVE.  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

3096 S OAKLAND FOREST DR  
APT. 1606  
OAKLAND PARK, FL 33309

**Current Mailing Address:**

4632 N ANDREWS AVE.  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

3096 S OAKLAND FOREST DR  
APT 1606  
OAKLAND PARK, FL 33309

**FEI Number:** 46-4489666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFFNER, ANNA MAJA  
4632 N ANDREWS AVE.  
FORT LAUDERDALE, FL 33309 US

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

HOFFNER, ANNA MAJA  
3096 S OAKLAND FOREST DR  
APT 1606  
OAKLAND PARK, FL 33309 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: ANNA MAJA HOFFNER

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HOFFNER, ANNA MAJA  
Address: 3096 S OAKLAND FOREST DR APT 1606  
City-St-Zip: OAKLAND PARK, FL 33309

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: ANNA MAJA HOFFNER

MGRM

04/30/2012

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