# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**May 01, 2012**
**Secretary of State**

DOCUMENT# L10000016510

**Entity Name:** DARKSIDE TATTOO EMPORIUM, LLC

**Current Principal Place of Business:**

5317-A EAST HWY. 22
PANAMA CITY, FL 32404

**New Principal Place of Business:**

**Current Mailing Address:**

5317-A EAST HWY. 22
PANAMA CITY, FL 32404

**New Mailing Address:**

**FEI Number: 80-0663824** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ANDERSON, ANGELA R
10506-B SUMMER HILL ROAD
FOUNTAIN, FL 32438 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: ANDERSON, ANGELA R
Address: 10506-B SUMMER HILL ROAD
City-St-Zip: FOUNTAIN, FL 32438

Title: MGRM
Name: WILSON, KYLIE M
Address: 1309 GRAVE AVE
City-St-Zip: PANAMA CITY, FL 32401

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 Statues.

SIGNATURE: ANGELA RENEE ANDERSON MS 05/01/2012

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