2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2011
Secretary of State

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Entity Name: ALTERED IMAGINATIONS TATTOO GALLERY, L.L.C.

Current Principal Place of Business:

2303 NORTH PONCE DE LEON BLVD.
SUITE "L"
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

2303 NORTH PONCE DE LEON BLVD.
SUITE
SAINT AUGUSTINE, FL 32084 US

Current Mailing Address:

13700 VIA ROMA CIRCLE
CLERMONT, FL 34711 US

New Mailing Address:

FEI Number: 27-4062462 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WERNING, MARK
13700 VIA ROMA CIRCLE
CLERMONT, FL 34711 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: WERNING, MARK
Address: 13700 VIA ROMA CIRCLE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR
Name: WERNING, MARLENE
Address: 13700 VIA ROMA CIRCLE
City-St-Zip: CLERMONT, FL 34711 US

Title: MGR
Name: MEETH, CHARLES JR.
Address: 18A REGINA LANE
City-St-Zip: PALM COAST, FL 32164 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 Statues.

SIGNATURE: MARK WERNING MGRM 04/23/2011

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