2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000073332

Entity Name: LIVE IN COLOR INC

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1911 SW 94TH TERR 102 S.W. SEA LION ROAD

MIRAMAR, FL 33025 PORT ST. LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

1911 SW 94TH TERR 102 S.W. SEA LION ROAD MIRAMAR, FL 33025 PORT ST. LUCIE, FL 34953 US

FEI Number: 80-0235135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWN, TRILLANIE

1911 SW 94TH TERR

MIRAMAR, FL 33025 US

BROWN, TRILLANIE

102 S.W. SEA LION ROAD

PORT ST. LUCIE, FL 34953 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: TRILLANIE BROWN 02/02/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P,D (X) Change () Addition

 Name:
 HODGE, CALVIT
 Name:
 HODGE, CALVIT

 Address:
 11538 NW 10TH ST
 Address:
 11538 NW 10TH ST

City-St-Zip: PEMBROKE PINES, FL 33016 City-St-Zip: PEMBROKE PINES, FL 33016 US

Title: VP () Delete Title: VP (X) Change () Addition Name: BROWN, THEODORE Name: BROWN, TRILLANIE

Address: 1911 SW 94TH TERR Address: 102 S.W. SEA LION ROAD

City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: PORT ST. LUCIE, FL 34953 US

 $\label{eq:title:SD} \mbox{Title:} \qquad \mbox{S,D} \qquad \mbox{(X) Change () Addition}$

 Name:
 BROWN, TRILLANIE
 Name:
 BROWN, THEODORE

 Address:
 1911 SW 94TH TERR
 Address:
 102 S.W. SEA LION ROAD

 City-St-Zip:
 MIRAMAR, FL 33025
 City-St-Zip:
 PORT ST. LUCIE, FL 34953 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 SMITH, CASS
 Name:
 SMITH, CASS

 Address:
 2300 NW 155 TERR
 Address:
 2300 NW 155TH TERRACE

 City-St-Zip:
 MIAMI, FL 33054
 City-St-Zip:
 MIAMI, FL 33054 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CALVIT HODGE P 02/02/2009