

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006396

Entity Name: ANNA & MICHELE LLC

FILED  
Apr 24, 2009  
Secretary of State

**Current Principal Place of Business:**

10700 WILES RD  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1875  
BOCA RATON, FL 33429

**New Mailing Address:**

FEI Number: 20-1921030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRAFICANTE, SALVATORE G  
550 S OCEAN BLVD  
1907  
BOCA RATON, FL 33432 US

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

TRAFICANTE, SALVATORE G  
2179 N. STATE ROAD 7  
MARGATE, FL 33063 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: TRAFICANTE

04/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TRAFICANTE, SALVATORE G  
Address: PO BOX 1875  
City-St-Zip: BOCA RATON, FL 33429

Title: MGRM ( ) Delete  
Name: TRAFICANTE, MARCOS A  
Address: PO BOX 1875  
City-St-Zip: BOCA RATON, FL 33429

Title: MGRM ( ) Delete  
Name: BIANCHI, LILIANA  
Address: PO BOX 1875  
City-St-Zip: BOCA RATON, FL 33429

Title: MGRM ( ) Delete  
Name: TRAFICANTE, ROMINA  
Address: PO BOX 1875  
City-St-Zip: BOCA RATON, FL 33429

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: TRAFICANTE

MGRM

04/24/2009

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