

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051579

Entity Name: BAL BOUTIQUE LC

FILED  
Jan 20, 2005  
Secretary of State

**Current Principal Place of Business:**

6915 RED RD, STE 219  
CORAL GABLES, FL 33143

**New Principal Place of Business:**

9700 COLLINS AVENUE  
#228  
BAL HARBOUR, FL 33143

**Current Mailing Address:**

6915 RED RD, STE 219  
CORAL GABLES, FL 33143

**New Mailing Address:**

6915 RED RD  
SUITE #219  
CORAL GABLES, FL 33143

FEI Number: 20-0485013

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSSZ FIU CORPORATION  
201 S BISCAYNE BLVD, STE 850  
MIAMI, FL 33131 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: CHAPUIS, JACQUELINE  
Address: 6915 RED RD, STE 219  
City-St-Zip: CORAL GABLES, FL 33143

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACQUELINE MARIN CHAPUIS

MGR

01/20/2005

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