2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018693

Address:

City-St-Zip:

Entity Name: STARS SKINCARE USA, LLC

19450 BLACK OLIVE LANE

BOCA RATON, FL 33498

FILED Aug 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 19450 BLACK OLIVE LANE 98 S. FEDERAL HWY BOCA RATON, FL 33498 BOCA RATON, FL 33432 US **Current Mailing Address: New Mailing Address:** 19450 BLACK OLIVE LANE BOCA RATON, FL 33498 FEI Number: 26-2021899 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: SHUSTER, ESTRELLA 19450 BLACK OLIVE LANE BOCA RATON, FL 33498 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SHUSTER, ESTRELLA Name: Name: Address: 19450 BLACK OLIVE LANE Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SHUSTER, JASON R 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: ESTRELLA SHUSTER MGRM 08/09/2009