

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004541

Entity Name: ALL SOCKS HOSIERY, LLC

FILED
Jun 29, 2009
Secretary of State

Current Principal Place of Business:

6365 COLLINS AVE
OFFICE # 3811
MIAMI BEACH, FL 33141

New Principal Place of Business:

3739 66TH AVE NE
NAPLES, FL 34120

Current Mailing Address:

6365 COLLINS AVE
OFFICE # 3811
MIAMI BEACH, FL 33141

New Mailing Address:

3739 66TH AVE NE
NAPLES, FL 34120

FEI Number: 74-3260668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH CT NORTH
LOXAHATCHEE, FL 33470 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 () Delete
Name: FACUSE, ROBERTO
Address: 6365 COLLINS AVE - OFFICE # 3811
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FACUSE, JOSE R
Address: 3739 66TH AVE NE
City-St-Zip: NAPLES, FL 34120

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: JOSE R. FACUSE

MGRM

06/29/2009

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