


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000105153
 1. Entity Name
 COULEUR PROVENCE, LLC



Principal Place of Business
 2313 NW 30TH STREET #2313
 OAKLAND PARK, FL 33311

Mailing Address
 2313 NW 30TH STREET #2313
 OAKLAND PARK, FL 33311

DO NOT WRITE IN THIS SPACE



02062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-8005551	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PARTOUCHE, PHILIPPE
 2701 S. BAYSHORE DRIVE, SUITE 402
 MIAMI, FL 33133

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

DATE: 02/19/08-80048-013 138.75

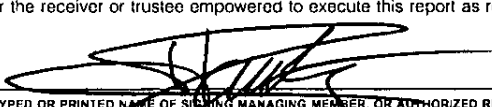
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PARTOUCHE, PHILIPPE 2313 NW 30TH STREET #2313 OAKLAND PARK, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACE, FABRICE 2313 NW 30TH STREET #2313 OAKLAND PARK, FL 33311
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Date: Feb 7, 2008 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE