

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000108435

Entity Name: MEW STORE HOLDINGS, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

20907 LEEWARD CT
#255
AVENTURA, FL 33180 US

Current Mailing Address:

20907 LEEWARD CT
#255
AVENTURA, FL 33180 US

New Principal Place of Business:

3565 NE 207 ST
A-15
AVENTURA, FL 33180 US

New Mailing Address:

3565 NE 207 ST
A-15
AVENTURA, FL 33180 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADIA, ENRICO
20907 LEEWARD CT
#255
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

MADIA, ENRICO
2330 NE 211 ST
AVENTURA, FL 33180 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: ENRICO MADIA

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MADIA, ENRICO
Address: 20907 LEEWARD CT #255
City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM () Delete
Name: MARQUEZ, WALESKA
Address: 20907 LEEWARD CT #255
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MADIA, ENRICO
Address: 2330 NE 211 ST
City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM (X) Change () Addition
Name: MARQUEZ, WALESKA
Address: 2330 NE 211 ST
City-St-Zip: AVENTURA, FL 33180 US

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: ENRICO MADIA

MGR

04/17/2009

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