

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000034843

**FILED**  
**Mar 26, 2011**  
**Secretary of State**

**Entity Name:** I.D. BEAUTY INTERNATIONAL DISTRIBUTION, LLC

**Current Principal Place of Business:**

5757 BLUE LAGOON DRIVE  
250  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

5757 BLUE LAGOON DRIVE  
250  
MIAMI, FL 33126 US

**New Mailing Address:**

**FEI Number:** 32-0244054

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARPER, GEORGE R  
MIAMI CENTER - SUITE 800  
201 S. BISCAYNE BLVD  
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/MANAGERS:**

**Title:** MGR  
**Name:** CUKIER, ALEXANDRE  
**Address:** 520 BRICKELL KEY DRIVE, STE O-305  
**City-St-Zip:** MIAMI, FL 33131

**Title:** MGR  
**Name:** KALIFA, PHILIPPE  
**Address:** 520 BRICKELL KEY DRIVE - SUITE O-301  
**City-St-Zip:** MIAMI, FL 33131

I hereby 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:** PHILIPPE KALIFA

MGR

03/26/2011

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