

**2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000089770

**Entity Name:** PARADIES-BROWARD, LLC

**Current Principal Place of Business:**

2849 PACES FERRY ROAD  
SUITE 400  
ATLANTA, GA 30339

**Current Mailing Address:**

2849 PACES FERRY ROAD  
SUITE 400  
ATLANTA, GA 30339 US

**FEI Number:** 20-5619438

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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

**Authorized Person(s) Detail :**

Title MGR  
Name THE PARADIES SHOPS, LLC  
Address 2849 PACES FERRY ROAD  
SUITE 400  
City-State-Zip: ATLANTA GA 30339  
  
Title MGR  
Name MARIA SOLDANI CONSULTING, LLC  
Address 1142 S.W. FIRST AVENUE  
City-State-Zip: POMPANO BEACH FL 33060

Title MGR  
Name JD RUFFIN ASSOCIATES, INC.  
Address 3111 N. UNIVERSITY DRIVE, SUITE  
1030  
City-State-Zip: CORAL SPRINGS FL 33065  
  
Title MGR  
Name RIGHT CONSULTING, LLC  
Address 3075 W. OAKLAND PARK BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33311

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THE PARADIES SHOPS, LLC

MGR

04/15/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date