

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000055601

**Entity Name:** ACCESSORIES BY JENNIE, LLC

**Current Principal Place of Business:**

5374 214TH COURT S  
BOCA RATON, FL 33486

**Current Mailing Address:**

5374 214TH COURT S  
BOCA RATON, FL 33486 US

**FEI Number: 25-0275104**

**Certificate of Status Desired: No**

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

JELILIAN, EILEEN  
5374 214TH COURT S  
BOCA RATON, FL 33486 US

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC2667936952**

*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 MGRM  
Name JELILIAN, EILEEN  
Address 5374 214TH COURT S  
City-State-Zip: BOCA RATON FL 33486

Title VP  
Name JELILIAN, JOHN  
Address 5374 214TH COURT S  
City-State-Zip: BOCA RATON FL 33486

Title SEC  
Name JOHN, JELILIAN  
Address 5374 214TH OURT S  
City-State-Zip: BOCA RATON FL 33486

Title TRES  
Name JOHN, JELILIAN  
Address 5374 214TH COURT S  
City-State-Zip: BOCA RATON FL 33486

Title DIR  
Name JOHN, JELILIAN  
Address 5374 214TH COURT S  
City-State-Zip: BOCA RATON FL 33486

Title DIR  
Name JELILIAN, JOHN  
Address 5374 214TH COURT S  
City-State-Zip: BOCA RATON FL 33486

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: EILEEN JELILIAN**

**PRESIDENT**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date