

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000092117

**Entity Name:** CHANSS LLC

**Current Principal Place of Business:**

10796 PINES BLVD  
STE 204  
PEMBROKE PINES, FL 33026

**Current Mailing Address:**

10796 PINES BLVD  
STE 204  
PEMBROKE PINES, FL 33026

**FEI Number:** 26-3334376

**Certificate of Status Desired:** Yes

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

MOYAL, PATRICK  
10796 PINES BLVD  
STE 204  
PEMBROKE PINES, FL 33026 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 BEYRAND, ANDRE  
Address LES HAUTS DE VAUGRENIER 3 ALLEE  
DU CALERNE  
City-State-Zip: VILLENEUVE LOUBET FR 06270

Title MGRM  
Name BEYRAND, STEPHANIE  
Address LES HAUTS DE VAUGRENIER 3 ALLEE  
DU CALERNE  
City-State-Zip: VILLENEUVE LOUBET FR 06270

Title MGRM  
Name BEYRAND, CHANTAL  
Address LES HAUTS DE VAUGRENIER 3 ALLEE  
DU CALERNE  
City-State-Zip: VILLENEUVE LOUBET FR 06270

Title MGRM  
Name BEYRAND, SOPHIE  
Address LES HAUTS DE VAUGRENIER 3 ALLEE  
DU CALERNE  
City-State-Zip: VILLENEUVE LOUBET FR 06270

*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:** ANDRE BEYRAND

**MGR**

**02/28/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date