2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000014751

1. EntityName
LAKEBEAUTY,LLC

FILED
04 APR 13 AM 7:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PrincipalPlaceofBusiness	MailingAddress
921 DOUGLAS AVE., STE. 200 ALTAMONTE SPRINGS, FL 32714	921 DOUGLAS AVE., STE. 200 ALTAMONTE SPRINGS, FL 32714

DO NOT WRITE IN THIS SPACE

04012004 No Chg-LLC CR2E083(10/03)

4. FEINumber
59-3695392
☐ AppliedFor
☐ NotApplicable

5. CertificateofStatusDesired ☐ **$5.00** Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

HARDING,ROBERTLESQ.
20N.EOLADR.
ORLANDO,FL32801

DO NOT WRITE IN THIS SPACE

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE _____
Signature,typedorprintednameofregisteredagentandtitleifapplicable (NOTE:RegisteredAgentsignaturerequiredwhenre instating) DATE

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DINKEL,MICHAELD
STREETADDRESS	7208SANDLAKERD.,STE.300
CITY-ST-ZIP	ORLANDO,FL32819
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
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TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	

600032637576
04/14/04--01002--001 **250.00

DO NOT WRITE IN THIS SPACE

11. Iherebycertifythattheinformationsuppliedwiththisfilingdoesnotqualifyfortheexemptionstatedin Section 119.07(3)(i), Florida Statutes. Ifurthercertifythattheinformation indicatedonthisreportistrueandaccurateandthatmysignatureshallhavethesamelegaleffectasifmadeunderoath; that I am a managing member or manager of the limitedliabilitycompanyorthereceiverortrusteeempoweredtoexecutethisreportasrequiredbyChapter608,FloridaStatutes.

SIGNATURE: _____ 4.5.04 407-3636700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date DaytimePhone#