

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 24, 2009  
Secretary of State**

DOCUMENT# L01000017469

Entity Name: B.A. STYLE LLC

**Current Principal Place of Business:**

5600 COLLINS AVENUE  
7L  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

5600 COLLINS AVENUE  
7L  
MIAMI BEACH, FL 33140

**New Mailing Address:**

FEI Number: 65-1157759      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GUERRA, LINETTE  
2275 BISCAYNE BLVD.  
MIAMI, FL 33137 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 ( ) Delete  
Name: PASTOR, MARIANO M  
Address: 5600 COLLINS AVENUE  
City-St-Zip: MIAMI BEACH, FL 33140

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: PASTOR, MARIANO M      MGR      03/24/2009

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