# 2005 LIMITED LIABILITY COMPANY
## ANNUAL REPORT

DOCUMENT # L02000010900

1. Entity Name
MANON & MARIE LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 199 OCEAN LANE DRIVE<br>SUITE 804<br>KEY BISCAYNE, FL 33149 | 199 OCEAN LANE DRIVE<br>SUITE 804<br>KEY BISCAYNE, FL 33149 |

## DO NOT WRITE IN THIS SPACE

01122005No Chg-LLC          CR2E083 (10/03)

| 4. FEI Number | Applied For |
|---|---|
| 03-0450623 | Not Applicable |

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

### 6. Name and Address of Current Registered Agent

DESVIGNE, NATHALIE
199 OCEAN LANE DRIVE
SUITE 804
KEY BISCAYNE, FL 33149

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.    (NOTE: Registered Agent signature required when reinstating)        DATE

**Filing Fee is $50.00**
**Due by May 1, 2005**

### 9. MANAGING MEMBERS/MANAGERS

| | | |
|---|---|---|
| TITLE | MGR | |
| NAME | DESVIGNE, NATHALIE | |
| STREET ADDRESS | 199 OCEAN LANE DRIVE | |
| CITY-ST-ZIP | KEY BISCAYNE, FL 33149 | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
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| CITY-ST-ZIP | | |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____                03/08/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE        Date        Daytime Phone #