2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000015270

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

ELEGANCE CLOTHING, L.L.C.



FILED Mar 30, 2007 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

13044 LOSANGLESE WOODS LANE ORLANDO, FL 32824

13044 LOSANGLESE WOODS LANE ORLANDO, FL 32824



03152007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	45-1540224

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LOISEAU, JEAN PAUL

DO NOT WRITE

13044 LOSANGLESE WOODS LANE ORLANDO, FL 32824		IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the purpose of chaions of registered agent	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and a	accept
SIGNATURE_	<u> </u>		_
	Signature, typed or printed name of registered agent and title if applicable:	(NOTE Registered Agent signature required when reinstating) DATE	
	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS	· ·	
TITLE	MGRM	:	
NAME	LOISEAU, YANICK	· ·	
STREET ADDRESS	13044 LOSANGLESE WOODS LANE		
CITY-ST-ZIP	ORLANDO, FL 32824		
NAME STREET ADDRESS CHY-ST-ZIP		U00000683790 04/06/07-30006-015 50.0	10
TITLE			
NAME			
STREET ADDRESS		I DO NOT WRITE	

IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 1 am a managing member or manager of the limited liability company or the received of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Daytime Phone #