


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000014570 1. Entity Name PEARL DRAGON COLLECTIONS, L.L.C.	
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Principal Place of Business 7366 SW 48TH STREET MIAMI, FL 33155	Mailing Address 7366 SW 48TH STREET MIAMI, FL 33155
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DO NOT WRITE IN THIS SPACE



01312008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 51-0462297	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410
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**DO NOT WRITE
IN THIS SPACE**

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


FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOLEY, THERESE P 7406 SW 52ND COURT MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOLEY, DANIELA P 7406 SW 52ND COURT MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERRINE, PAULA 7406 SW 52ND COURT MIAMI, FL 33143
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02/14/08-80010-011 138.75

**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 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:  Daniela Foley **1-31-08 305-663-3541**

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