

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 26, 2008 08:00 A
Secretary of State

DOCUMENT # L03000025250	
1. Entity Name ALAN STUART INTERNATIONAL, L.L.C.	
Principal Place of Business 5739 NW 159 ST MIAMI LAKES, FL 33014	Mailing Address 5739 NW 159 ST MIAMI LAKES, FL 33014



01142008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0083108	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BALOG, ANDREW E ESQ
1221 BRICKELL AVENUE
MIAMI, FL 33131

**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 BAREJO USA 200 INDUSTRIAL PARK ROAD ST. ALBANS, VT 05478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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03/06/08-80037-005 138.75

**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: JOEL SEGAL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Jan 14, 2008 (802) 527-1222

Date

Daytime Phone #