2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028759

Entity Name: GLITZY CHIX LLC

FILED Apr 21, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7832 COLLINS AVENUE

APT. 603

MIAMI BEACH, FL 33141 US

Current Mailing Address: New Mailing Address:

7832 COLLINS AVENUE APT. 603

MIAMI BEACH, FL 33141 US

FEI Number: 72-1578967 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GLASSMAN, STACEY 7832 COLLINS AVENUE APT. 603 MIAMI BEACH, FL 33141 US

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.

Name:

Address:

City-St-Zip:

SIGNATURE:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

 Title:
 MGRM () Delete

 Name:
 GLASSMAN, STACEY

 Address:
 7832 COLLINS AVENUE, APT. 603

City-St-Zip: MIAMI BEACH, FL 33141 US

Title: MGRM () Delete
Name: MURRAY, CAROLINE

Address: 6770 INDIAN CREEK DRIVE, APT. 6M

City-St-Zip: MIAMI BEACH, FL 33141 US

 Title:
 MGRM () Delete

 Name:
 CADY, MONICA

 Address:
 900 BAY DRIVE, UNIT 719

 City-St-Zip:
 MIAMI BEACH, FL 33141 US

Title: MGRM (X) Change () Addition Name: MURRAY, CAROLINE MS.

GLASSMAN, STACEY MS.

MIAMI BEACH, FL 33141 US

7832 COLLINS AVENUE, APT. 603

(X) Change () Addition

Address: 6770 INDIAN CREEK DRIVE, APT. 6M City-St-Zip: MIAMI BEACH, FL 33141 US

Title: MGRM (X) Change () Addition Name: CADY, MONICA MS.

Address: 900 BAY DRIVE, UNIT 719 City-St-Zip: MIAMI BEACH, FL 33141 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAROLINE MURRAY MS. 04/21/2004