

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030944

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: HOME MAKE UP DESIGNS, LLC

**Current Principal Place of Business:**

1625 ORION LANE  
WESTON, FL 33327

**New Principal Place of Business:**

**Current Mailing Address:**

1625 ORION LANE  
WESTON, FL 33327

**New Mailing Address:**

FEI Number: 20-0162852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ILEANA ARIAS TOVAR, ESQ  
ARIAS TOVAR & ASSOCIATES, P.A.  
1725 MAIN ST, STE 209-WESTON TOWN CENTER  
WESTON, FL 33326 US

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

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: JUAN A. ORTIZ DE LAN, DAZURI MARTIN  
Address: 1625 ORION LANE  
City-St-Zip: WESTON, FL 33327

Title: MGR ( ) Delete  
Name: SARI ORTIZ DE LANDAZ, URI  
Address: 1625 ORION LANE  
City-St-Zip: WESTON, FL 33327

Title: MGR ( ) Delete  
Name: ADRIANI, CHRISTINE  
Address: 1625 ORION LANE  
City-St-Zip: WESTON, FL 33327

Title: MGR ( ) Delete  
Name: JUAN A. ORTIZ DE LAN, DAZURI RECASEN S  
Address: 1625 ORION LANE  
City-St-Zip: WESTON, FL 33327

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN A. ORTIZ DE LANDAZURI

MGR

04/15/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date