## FILED Apr 14, 2005 08:00 A Secretary of State

## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L03000039331** 1. Entily Name
B'EAUTIQUE LLC Principal Place of Business Mailing Address 8211 W. BROWARD BLVD., #340 8211 W. BROWARD BLVD., #340 PLANTATION, FL 33324 PLANTATION, FL 33324 CR2E083 (10/03) 02252005 No Chg-LLC Applied For 4. FEI Number 20-0721767 Not Applicable \$5.00 Additional 6. Name and Address of Current Registered Agent DO NOT WRITE BERKOVITS, JOE S 8211 W. BROWARD BLVD., SUITE 340 IN THIS SPACE PLANTATION, FL 33324 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulard when reinstation) DATE Filing Fee is \$50.00 Due by May 1, 2005 U00000305729 MANAGING MEMBERS/MANAGERS 9. TITLE ROMEPORT USA INC NAME 8211 W BROWARD BLVD., #340 STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33324 TITLE NAME, STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Fiorida Statutes. I further certify that the information indicated on this report is frue 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: