

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jul 15, 2004 8:00 am
Secretary of State

07-15-2004 90049 003 ****50.00

DOCUMENT # L03000048732			
1. Entity Name BANDAGES DIRECT, LLC			
Principal Place of Business PO BOX 1884 HALLANDALE BEACH, FL 33008 US		Mailing Address PO BOX 1884 HALLANDALE BEACH, FL 33008 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent COHEN, PAMELA 7572 ANDORRA PLACE BOCA RATON, FL 33433		5. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		Zip Code	
6. 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 _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when re-registered)			
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COHEN, PAMELA 7572 ANDORRA PLACE BOCA RATON, FL 33433 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HUMEN, SUZANNE 800 PARKVIEW DR. #522 HALLANDALE BEACH, FL 33008 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Suzanne Humen</i>		7/9/04	
PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	



07082004 Cng-LLC CR2E083 (10/03)

4. FEI Number **58-2682247** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

Attachment
14025698

**Bandages Direct LLC
PO Box 1884
Hallandale Beach, Florida 33008**

July 8, 2004

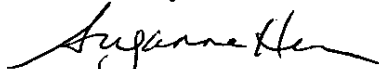
Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: 2004 Annual Report
Document # L03000048732

Gentlemen:

Enclosed please find my check for \$50.00 for my 2004 annual report. Please be advised that I (or anybody in my office) never received the initial annual report that should have been sent to my offices during January 2004. If you have any questions, please do not hesitate to contact me.

Sincerely


Suzanne Humen