2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021230

Entity Name: AMORE BEADS, LLC

FILED Mar 23, 2006 Secretary of State

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

4691 N UNIVERSITY DRIVE CORAL SPRINGS, FL 33067

Current Mailing Address: New Mailing Address:

5919 NW 122 DRIVE 12580 NW 65TH DRIVE CORAL SPRINGS, FL 33076 PARKLAND, FL 33076

FEI Number: 20-0796067 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:

ROLNICK, HERBERT H 9734 W. SAMPLE ROAD CORAL SPRINGS FL 3360

CORAL SPRINGS, FL 33605 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.

SIGNATURE:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

MGRM Title: MGRM (X) Change () Addition () Delete KALISTER, LINDA KALISTER, LINDA Name: Name: Address: 5919 NW 122 DRIVE Address: 12580 NW 65TH DRIVE City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: PARKLAND, FL 33076

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: KALISTER, D. SCOTT Name: KALISTER, D. SCOTT

 Name:
 KALISTER, D. SCOTT
 Name:
 KALISTER, D. SCOTT

 Address:
 5919 NW 122 DRIVE
 Address:
 12580 NW 65TH DRIVE

 City-St-Zip:
 CORAL SPRINGS, FL 33076
 City-St-Zip:
 PARKLAND, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: D. SCOTT KALISTER MGMR 03/23/2006