2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042534

Entity Name: LAVISH COUTURE LC

Current Principal Place of Business:

FILED Feb 13, 2007 Secretary of State

13750 NW 18 CT PEMBROKE PINES, FL 33028 **Current Mailing Address: New Mailing Address:** 13750 NW 18 CT PEMBROKE PINES, FL 33028 FEI Number: 20-2772952 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: STCLAIR, SHANNON S 13750 NW 18 CT PEMBROKE PINES, FL 33028 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.

MANAGING MEMBERS/MANAGERS:

SIGNATURE:

e: MGRM () Delete

Name: STCLAIR, SHANNON S Address: 13750 NW 18 CT

City-St-Zip: PEMBROKE PINES, FL 33028 US

Electronic Signature of Registered Agent

Title: MGRM () Delete

Name: STCLAIR, JOHN B Address: 13750 NW 18 CT

City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: () Change () Addition

New Principal Place of Business:

Name: Address: City-St-Zip:

Name:

Address:

City-St-Zip:

Title: () Change () Addition

Date

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: SHANNON STCLAIR MRS 02/13/2007