

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000086471

**FILED**  
**Feb 09, 2011**  
**Secretary of State**

**Entity Name:** CLEOPATRAS BATH & BODY LLC

**Current Principal Place of Business:**

241 W VENICE AVE  
VENICE, FL 34285

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 144  
VENICE, FL 34284

**New Mailing Address:**

**FEI Number:** 41-2184357

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BREMERT, IRENE G  
184 BRAEMAR AVENUE  
VENICE, FL 34293 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/MANAGERS:**

Title: MGRM  
Name: BREMERT, IRENE G  
Address: 184 BRAEMAR AVENUE  
City-St-Zip: VENICE, FL 34293

I hereby 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: IRENE BREMERT

MGRM

02/09/2011

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