

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107515

Entity Name: BATHTRENDS LLC

FILED  
Jan 24, 2007  
Secretary of State

## Current Principal Place of Business:

2901 NW 79 AVENUE  
MIAMI, FL 33122

## New Principal Place of Business:

2913 NW 79 AVENUE  
DORAL, FL 33122

## Current Mailing Address:

2901 NW 79 AVENUE  
MIAMI, FL 33122

## New Mailing Address:

2913 NW 79 AVENUE  
DORAL, FL 33122

FEI Number: 20-3770942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARRAS, CRISTIAN  
2901 NW 79 AVENUE  
MIAMI, FL 33122 US

## Name and Address of New Registered Agent:

PARRAS, CRISTIAN  
2913 NW 79 AVENUE  
DORAL, FL 33122 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: CRISTIAN PARRAS

01/24/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PARRAS, CRISTIAN  
Address: 2901 NW 79 AVENUE  
City-St-Zip: MIAMI, FL 33122

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PARRAS, CRISTIAN  
Address: 2913 NW 79 AVENUE  
City-St-Zip: DORAL, FL 33122

Title: MGR ( ) Change (X) Addition  
Name: CAIRO, BEATRIZ  
Address: 2913 NW 79 AVENUE  
City-St-Zip: MIAMI, FL 33122

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: BEATRIZ CAIRO

MGR

01/24/2007

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