

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108569

FILED
Feb 08, 2007
Secretary of State

Entity Name: K.B.FASHIONS LLC

Current Principal Place of Business:

328 CRANDON BLVD
118
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

328 CRANDON BLVD
118
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: 04-3840903 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLINA, MARGARITA
328 CRANDON BLVD
118
KEY BISCAYNE, FL 33149 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 () Delete
Name: MOLINA, MARGARITA V
Address: 328 CRANDON BLVD, 118
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGRM () Delete
Name: VELHAGEN, MARGARITA M
Address: 328 CRANDON BLVD, 118
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGRM () Delete
Name: VELHAGEN, MARIANNE M
Address: 328 CRANDON BLVD, 118
City-St-Zip: KEY BISCAYNE, FL 33149 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: MOLINA, MARIANNE V
Address: 328 CRANDON BLVD, 118
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: MARGARITA MOLINA

MGRM

02/08/2007

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