

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108618

FILED
Apr 08, 2009
Secretary of State

Entity Name: MOMMY AND ME BOUTIQUE LLC

Current Principal Place of Business:

5548 66TH ST N.
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

7531 18TH WAY NORTH
ST. PETERSBURG, FL 33702

New Mailing Address:

7531 18TH WAY NORTH
ST. PETERSBURG, FL 33702

FEI Number: 20-3772509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADAMS, MARY
7531 18TH WAY N.
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

JAMAL, QANDIL
7531 18TH WAY N.
ST. PETERSBURG, FL 33702 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: JAMAL QANDIL

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADAMS, MARY
Address: 7531 18TH WAY N.
City-St-Zip: ST. PETERSBURG, FL 33702

Title: MGRM () Delete
Name: QANDIL, NABIL
Address: 5150 42ND PLACE N.
City-St-Zip: ST. PETERSBURG, FL 33709

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: JAMAL, QANDIL P
Address: 7531 18TH WAY N.
City-St-Zip: ST. PETERSBURG, FL 33702

Title: MGRM (X) Change () Addition
Name: QANDIL, NABIL V.P
Address: 1175 8TH WAY NORTH
City-St-Zip: ST. PETERSBURG, FL 33716

I hereby certify that the information supplied with this filing does not qualify 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: NABIL QANDIL

V.P

04/08/2009

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