

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113487

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: SAVVY CHIQUES, LLC

## Current Principal Place of Business:

P.O. BOX 811932  
BOCA RATON, FL 334811932

## New Principal Place of Business:

2200 CORPORATE BLVD., N.W.  
SUITE 210  
BOCA RATON, FL 33431

## Current Mailing Address:

P.O. BOX 811932  
BOCA RATON, FL 334811932

## New Mailing Address:

2200 CORPORATE BLVD., N.W.  
SUITE 210  
BOCA RATON, FL 33431

FEI Number: 20-4568455

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEILLY, ROXANNE K  
2200 CORPORATE BLVD. N.W. SUITE 210  
BOCA RATON, FL 33431 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: O ( ) Delete  
Name: BEILLY, ROXANNE K  
Address: 2200 CORPORATE BLVD NW #210  
City-St-Zip: BOCA RATON, FL 33431

Title: O ( ) Delete  
Name: VERHEES, ANJA M  
Address: 2200 CORPORATE BLVD NW #210  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES:

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

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

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: ROXANNE K. BEILLY

M

04/30/2009

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