

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 15, 2006
Secretary of State

DOCUMENT# L05000119741

Entity Name: LAILIEN ESTHETICS, LLC

Current Principal Place of Business:

7868 NW 17TH PL
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

7750 TAFT ST #4
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

7868 NW 17TH PL
PEMBROKE PINES, FL 33024 US

New Mailing Address:

FEI Number: 02-0763685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

LAING, CHARMAINE P
7868 NW 17TH PLACE
PEMBROKE PINES, FL 33024 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: CHARMAINE LAING

08/15/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAING, CHARMAINE P
Address: 7868 NW 17TH PL
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: MGRM () Delete
Name: LAING, DULCIE
Address: 1418 NE 150 STREET
City-St-Zip: NORTH MIAMI, FL 33161 US

Title: MGRM (X) Delete
Name: MERILIEN, ROMANE
Address: 7868 NW 17TH PL
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES:

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

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 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: CHARMAINE LAING

MGRM

08/15/2006

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