

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

01-24-2007 90053 024 ****50.00

DOCUMENT # L06000014868

1. Entity Name
BEACHWEAR-R-US, LLC



Principal Place of Business
**110 E. COMMERCIAL BLVD.
LAUDERDALE-BY-THE SEA, FL 33308**

Mailing Address
**110 E. COMMERCIAL BLVD.
LAUDERDALE-BY-THE SEA, FL 33308**

30002087



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01112007 Chg-LLC CR2E083 (12/06)

4. FEI Number

20-4301697

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DAVIS, CORBY
1381 SW 21 LANE
BOCA RATON, FL 33486**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Corby Davis
Signature, typed or printed name of registered agent and title if applicable

Corby Davis
(NOTE: Registered Agent signature required when reappointing)

3/3/07
DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
DAVIS, CORBY
1381 SW 21 LANE
BOCA RATON, FL 33486 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
DAVIS, KAREN K
1381 SW 21 LANE
BOCA RATON, FL 33486 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Corby Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/3/07
Date

Daytime Phone #