

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028463

FILED
May 11, 2007
Secretary of State

Entity Name: FASHION BUG #3729, LLC

Current Principal Place of Business:

450 WINKS LANE
BENSALEM, PA 19020

New Principal Place of Business:

Current Mailing Address:

3750 STATE ROAD
BENSALEM, PA 19020

New Mailing Address:

FEI Number: 20-4502195 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:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FASHION BUG RETAIL C, OMPANIES, INC.
Address: 450 WINKS LANE
City-St-Zip: BENSALEM, PA 19020

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: SULLIVAN, JOHN
Address: 450 WINKS LANE
City-St-Zip: BENSALEM, PA 19020

Title: MGR () Change (X) Addition
Name: SPECTER, ERIC
Address: 450 WINKS LANE
City-St-Zip: BENSALEM, PA 19020

Title: MGR () Change (X) Addition
Name: GLUECK, NEAL
Address: 3750 STATE RD
City-St-Zip: BENSALEM, PA 19020

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: NEAL GLUECK

MGR

05/11/2007

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