

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035810

FILED
May 29, 2008
Secretary of State

Entity Name: BARBIZON USA LLC

Current Principal Place of Business:

3111 NORTH UNIVERSITY DRIVE, SUITE 406
CORAL SPRINGS, FL 33065

New Principal Place of Business:

4950 W. KENNEDY BLVD SUITE 200
TAMPA, FL 33609

Current Mailing Address:

3111 NORTH UNIVERSITY DRIVE, SUITE 406
CORAL SPRINGS, FL 33065

New Mailing Address:

4950 W. KENNEDY BLVD SUITE 200
TAMPA, FL 33609

FEI Number: 20-4703132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ROTHBERG, BARRY
3111 NORTH UNIVERSITY DRIVE, SUITE 406
CORAL SPRINGS, FL 33065 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:

ADDITIONS/CHANGES:

Title: CEO () Delete
Name: MCCORMICK, TIMOTHY CEO
Address: 4950 W. KENNEDY BLVD
City-St-Zip: TAMPA, FL 33609 US

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

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

Title: CFO () Change (X) Addition
Name: VAN SANT, PAMELA
Address: 4950 W. KENNEDY BLVD SUITE 200
City-St-Zip: TAMPA, FL 33609

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: PAMELA VAN SANT

CFO

05/29/2008

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