

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000068261

Entity Name: CUFFLINKS DEPOT LLC

FILED
May 27, 2008
Secretary of State

Current Principal Place of Business:

2028 WESTOVER RESERVE BLVD.
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

2028 WESTOVER RESERVE BLVD.
WINDERMERE, FL 34786

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: MGR () Delete
Name: SHROFF, SWETA
Address: 2028 WESTOVER RESERVE BLVD.
City-St-Zip: WINDERMERE, FL 34786

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

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: SHROFF, SANJEEV
Address: 2028 WESTOVER RESERVE BLVD.
City-St-Zip: WINDERMERE, FL 34786

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: SWETA SHROFF

MGR

05/27/2008

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