



# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 27, 2007 8:00 am**  
**Secretary of State**

04-27-2007 90027 039 \*\*\*\*55.00

|  |   |  |   |   |  |
|--|---|--|---|---|--|
| <b>DOCUMENT # L06000102436</b><br>1. Entity Name<br><b>THE ELITE SPA TEAM, LLC</b>   |   |  |   |  |  |
| Principal Place of Business<br><b>500 N.E. 2ND STREET, #401<br/>DANIA BEACH, FL 33004</b>  |   |  | Mailing Address<br><b>500 N.E. 2ND STREET, #401<br/>DANIA BEACH, FL 33004</b> |   |  |
| 2. Principal Place of Business - No P.O. Box #<br><br>Suite, Apt. #, etc.  |   | 3. Mailing Address<br><br>Suite, Apt. #, etc.  |   |   |  |
| City & State<br><br>Zip      Country   |   | City & State<br><br>Zip      Country   |   | 4. FEI Number<br><b>22-3945325</b>  |  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/>   |   | Applied For<br>Not Applicable  |   |   |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SPIEGEL &amp; UTRERA, P.A.<br/>1840 SW 22ND ST.<br/>4TH FLOOR<br/>MIAMI, FL 33145</b>  |   | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____  |   |  |   |   |  |
| <b>Filing Fee is \$50.00<br/>Due by May 1, 2007</b>  |   | <b>Make check payable to<br/>Florida Department of State</b>   |   |   |  |
| <b>9. MANAGING MEMBERS/MANAGERS</b>  |   |  | <b>10. ADDITIONS/CHANGES</b>  |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <b>MGR<br/>FERREY, MARISOL<br/>500 N.E. 2ND STREET, #401<br/>DANIA BEACH, FL 33004</b>  | <input type="checkbox"/> Delete  |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <b>MGR<br/>FERREY, RAMIRO J<br/>500 N.E. 2ND STREET, #401<br/>DANIA BEACH, FL 33004</b> | <input type="checkbox"/> Delete  |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <b>S<br/>FERREY, RAMIRO J<br/>500 N.E. 2ND STREET, #401<br/>DANIA BEACH, FL 33004</b>   | <input type="checkbox"/> Delete  |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <b>T<br/>FERREY, MARISOL<br/>500 N.E. 2ND STREET, #401<br/>DANIA BEACH, FL 33004</b>    | <input type="checkbox"/> Delete  |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <br><br><br>  | <input type="checkbox"/> Delete  |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <br><br><br>  | <input type="checkbox"/> Delete  |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <br><br><br>  | <input type="checkbox"/> Delete  |   |   |  |
| 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. |   |  |   |   |  |
| <b>SIGNATURE:</b>   |   | <b>04-15-2007      954-826-1610</b>  |   |   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE  |   | Date   |   | Daytime Phone #   |  |

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04112007 Chg-LLC CR2E083 (12/06)