

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000107486

Entity Name: NICOLE ROSE, LLC

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

723 N LINCOLN LN  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

723 N LINCOLN LN  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 68-0638574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PLOSHNICK, SARI  
723 N LINCOLN LANE  
MIAMI BEACH, FL 33139 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: MGRM  
Name: PLOSHNICK, SARI  
Address: 723 N LINCOLN LN  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR  
Name: PLOSHNICK, SHELLI  
Address: 17499 TIFFANY TRACE DRIVE  
City-St-Zip: BOCA RATON, FL 33487

I hereby 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: SARI PLOSHNICK

MGRM

03/27/2012

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