

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000005170

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: BEAUTEK SOLUTIONS, LLC

**Current Principal Place of Business:**

830 NW 87TH AVE  
# 406  
MIAMI, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

830 NW 87TH AVE  
# 406  
MIAMI, FL 33172 US

**New Mailing Address:**

FEI Number: 22-3954617      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MATOS, GINA  
830 NW 87TH AVE  
# 406  
MIAMI, FL 33172 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 ( ) Delete  
Name: MATOS, GINA  
Address: 830 NW 87TH AVE # 406  
City-St-Zip: MIAMI, FL 33172 US

Title: MGRM ( ) Delete  
Name: MATOS, DAVID  
Address: 830 NW 87TH AVE # 406  
City-St-Zip: MIAMI, FL 33172 US

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

Title: MGRM ( ) Change (X) Addition  
Name: RIVERA, JOSE  
Address: 9060 NW 8ST APT # 208  
City-St-Zip: MIAMI, FL 33172

Title: MGR ( ) Change (X) Addition  
Name: RIVERA, JUSTINA  
Address: 9060 NW 8ST APT # 208  
City-St-Zip: MIAMI, FL 33172

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: DAVID MATOS

MGR

04/30/2009

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