

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000026814

**FILED**  
**May 26, 2010**  
**Secretary of State**

**Entity Name:** LEJEUNE PRECISION COSMETIC APPLICATION, LLC

**Current Principal Place of Business:**

14799 OLD THICKET TRACE  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22171  
LAKE BUENA VISTA, FL 32830

**New Mailing Address:**

**FEI Number:** 55-0913547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEJEUNE, RANDY  
14799 OLD THICKET TRACE  
WINTER GARDEN, FL 34787 US

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

KARLA E. VALLADARES, ATTORNEY AT LAW, LLC  
10125 W COLONIAL DRIVE  
SUITE 218  
OCOOEE, FL 34761 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:** KARLA E. VALLADARES, ATTORNEY AT LAW

05/26/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LEJEUNE, RANDY  
**Address:** 14799 OLD THICKET TRACE  
**City-St-Zip:** WINTER GARDEN, FL 34787

**Title:** MGRM  
**Name:** LEJEUNE, PATRICIA  
**Address:** 14799 OLD THICKET TRACE  
**City-St-Zip:** WINTER GARDEN, FL 34787

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:** KARLA E. VALLADARES, ATTORNEY AT LAW

ATTY

05/26/2010

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