2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 28, 2008 8:00 am Secretary of State 04-28-2008 90048 014 ***138.75

1. Entity Name



STIVIDEL	LA JEWELS-HSN, LLC							
Principal Place of Business 1816 MONTE CARLO WAY CORAL SPRINGS, FL 33071 US		Mailing Address 1816 MONTE CARLO WAY CORAL SPRINGS, FL 33071 US			0030337	II SZIM RIYN ZZM		H ar i (4 108 1
2. Principal F	Mace of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04202008	Chg-LLC	CR2E083	3 (12/06)	
City & State		City & State		4. FEI Numb	-898926°	7		oplied For ot Applicab
Zip	Country	Zip	Country	5. Certificate	of Status Desired		5.00 Add e Require	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New R	egistered Ag	ent	
COLIENT	018/1116		Name					
	THYLLIS ITE CARLO WAY PRINGS, FL `33071		Street Ad	ldress (P.O. Box Numb	er is Not Acceptable	e)		
:	1 1 2		City			FL	Zip Cod	e
8. The above the obligat	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registered office or	registered agent, or bo	th, in the State of Flo	orida. I am far	niliar with,	and accer
SIGNATURE								
1	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	Registered Agent signatur	e required when reinstating)		DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75								
FILE After Ma ₃	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75			Į		e check pay Departmen		e
FILE After May	NOWIII FEE IS \$138.75 71, 2008 Fee will be \$538.75 MANAGING MEMBE		10.			Departmen		e
After May	MANAGING MEMBE		10. TITLE		Florida	Departmen CHANGES		e Additio
9. TITLE NAME	MANAGING MEMBE MGRM COHEN, PHYLLIS	RS/MANAGERS	TITLE NAME		Florida	Departmen CHANGES	t of Stat	
9. TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS/MANAGERS	TITLE NAME STREET ADDRESS		Florida	Departmen CHANGES	t of Stat	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE MGRM COHEN, PHYLLIS	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida	CHANGES	Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida	CHANGES	t of Stat	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida	CHANGES	Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florida	CHANGES	Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Florida	Department CHANGES	Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florida	Department CHANGES	t of State	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Florida	Department CHANGES	t of State	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida	Department CHANGES	change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida	Department CHANGES	t of State	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florida	Department CHANGES	change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida	Department CHANGES	change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida	CHANGES [change Change Change	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida	CHANGES [change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida	CHANGES [change Change Change	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florida	CHANGES [change Change Change	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida	CHANGES [change Change Change	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florida	CHANGES [change Change Change	Addition Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE MGRM COHEN, PHYLLIS 1816 MONTE CARLO WAY	RS / MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida	CHANGES [change Change Change	Addition Addition Addition Addition

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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.