

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000076860

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** BEACHES HAIR REMOVAL LLC

**Current Principal Place of Business:**

1112 THIRD ST  
#3  
NEPTUNE BEACH, FL 32266 US

**New Principal Place of Business:**

**Current Mailing Address:**

860 SHORELINE CIRCLE  
PONTE VEDRA BEACH, FL 32082 US

**New Mailing Address:**

**FEI Number:** 13-4368015      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FOSTER, AMANDA S  
1112 THIRD ST.  
#3  
NEPTUNE BEACH, FL 32266 US

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

CROUCH, AMANDA S  
1112 THIRD ST.  
#3  
NEPTUNE BEACH, FL 32266 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: AMANDA S. CROUCH

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CROUCH, AMANDA S  
Address: 1112 THIRD ST. #3  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

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: AMANDA S. CROUCH

MGR

02/16/2010

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