

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000097910

Entity Name: CECE'S BOUTIQUE, LLC

FILED
Jan 17, 2008
Secretary of State

Current Principal Place of Business:

404 BROOKFIELD DR
KISSIMMEE, FL 34758

New Principal Place of Business:

4663 OLD PLEASANT HILL RD.
KISSIMMEE, FL 34758 US

Current Mailing Address:

404 BROOKFIELD DR
KISSIMMEE, FL 34758

New Mailing Address:

4663 OLD PLEASANT HILL RD.
KISSIMMEE, FL 34758 US

FEI Number: 26-1204021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTALVO, CARMEN
404 BROOKFIELD DR
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

ESPIRITUSANTO, CARMEN
4663 OLD PLEASANT HILL RD.
KISSIMMEE, FL 34758 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: CARMEN ESPIRITUSANTO

01/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MONTALVO, CARMEN
Address: 404 BROOKFIELD DR
City-St-Zip: KISSIMMEE, FL 34741

Title: MGR (X) Delete
Name: MONTALVO, ISMAEL
Address: 404 BROOKFIELD DR
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: ESPIRITUSANTO, CARMEN
Address: 4663 OLD PLEASANT HILL RD.
City-St-Zip: KISSIMMEE, FL 34758 US

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

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: CARMEN ESPIRITUSANTO

P

01/17/2008

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