

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000103188

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** BEAUTY EXPRESSIONS SALON & SPA, LLC

**Current Principal Place of Business:**

7601 E. TREASURE DR  
C-U 19  
NORTH BAY VILLAGE, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

7601 E. TREASURE DR  
C-U 19  
NORTH BAY VILLAGE, FL 33141

**New Mailing Address:**

**FEI Number:** 26-1214607      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

PADILLA, JAVIER  
3025 INDIAN CREEK DR  
APT. 207  
MIAMI BEACH, FL 33140 US

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

PADILLA, JAVIER A  
9064 CARLYLE AVE.  
SURFSIDE, FL 33154 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: JAVIER A. PADILLA

05/03/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PADILLA, JAVIER A  
Address: 9064 CARLYLE AVE.  
City-St-Zip: SURFSIDE, FL 33154

Title: MGR  
Name: PERDOMO, LILIANA  
Address: 9064 CARLYLE AVE.  
City-St-Zip: SURFSIDE, FL 33154

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: JAVIER A. PADILLA

MGR

05/03/2010

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