

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Jun 22, 2009
Secretary of State**

DOCUMENT# L08000005231

Entity Name: MUD BEAUTY SUPPLY LLC

Current Principal Place of Business:

20530 NE 19TH AVE
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

20530 NE 19TH AVE
MIAMI, FL 33179

New Mailing Address:

FEI Number: 33-1197570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVRON, URI
20530 NE 19TH AVE
MAIMI, FL 33179 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PORTAL, SHIMRIT
Address: 20530 NE 19TH AVE
City-St-Zip: MAIMI, FL 33179

Title: MGR () Delete
Name: EVRON, URI Z
Address: 20530 NE 19TH AVE
City-St-Zip: MIAMI, FL 33179

Title: MGR () Delete
Name: SAIG, DAVID
Address: 20530 NE 19TH AVE
City-St-Zip: MAIMI, FL 33179

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PORTAL, SHIMRIT
Address: 20530 NE 19TH AVE
City-St-Zip: MAIMI, FL 33179

Title: MGRM (X) Change () Addition
Name: EVRON, URI Z
Address: 20530 NE 19TH AVE
City-St-Zip: MIAMI, FL 33179

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: URI EVRON

MGRM

06/22/2009

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