

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009012

Entity Name: BARE SKINWEAR, LLC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

3731 SW 160 AVE  
UNIT 107  
MIRAMAR, FL 33027

## Current Mailing Address:

3731 SW 160 AVE  
UNIT 107  
MIRAMAR, FL 33027

## New Principal Place of Business:

3831 SW 160 AVE  
UNIT 107  
MIRAMAR, FL 33027

## New Mailing Address:

3831 SW 160 AVE  
UNIT 107  
MIRAMAR, FL 33027

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALAVE, ROSA  
3831 SW 160 AVE  
UNIT 107  
MIRAMAR, FL 33027 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: MALAVE, ROSA  
Address: 3731 SW 160 AVE - UNIT 107  
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM ( ) Delete  
Name: CASTILLO, DENISE  
Address: 3731 SW 160 AVE - UNIT 107  
City-St-Zip: MIRAMAR, FL 33027

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MALAVE, ROSA  
Address: 3831 SW 160 AVE - UNIT 107  
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM (X) Change ( ) Addition  
Name: CASTILLO, DENISE  
Address: 3831 SW 160 AVE - UNIT 107  
City-St-Zip: MIRAMAR, FL 33027

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: ROSA MALAVE

MGRM

04/29/2009

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