

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000044994

Entity Name: PERFECT LIFESTYLES LLC

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

8226 CRESCENT MOON DRIVE
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

8226 CRESCENT MOON DRIVE
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number: 26-2558343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: BARAN, CHRIS
Address: 8226 CRESCENT MOON DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: MGRM () Delete
Name: BARAN, DONNA
Address: 8226 CRESCENT MOON DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES:

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

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: CHRIS BARAN

MGRM

02/24/2009

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