

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000048880

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** LOLLYPOP KIDS SALON L.L.C

**Current Principal Place of Business:**

15651 SHERIDAN ST  
SUITE 1100  
DAVIE, FL 33331 US

**New Principal Place of Business:**

**Current Mailing Address:**

15651 SHERIDAN ST  
SUITE 1100  
DAVIE, FL 33331 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

MEDINA, TONY  
15651 SHERIDAN ST  
SUITE1100  
DAVIE, FL 33331 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: MR  
Name: MEDINA, TONY  
Address: 15651 SHERIDAN ST 1100  
City-St-Zip: DAVIE, FL 33331

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: TONY MEDINA                      PRES                      04/05/2010

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