

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000050888

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** LA PETITE AVALON SALON & DAY SPA, LLC

**Current Principal Place of Business:**

17429 BRIDGE HILL CT  
TAMPA, FL 336473467 US

**New Principal Place of Business:**

15347 AMBERLY DRIVE  
TAMPA, FL 33647

**Current Mailing Address:**

15303 AMBERLY DR STE B  
TAMPA, FL 336472308 US

**New Mailing Address:**

15347 AMBERLY DRIVE  
TAMPA, FL 33647

**FEI Number:** 94-3434913

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARKOWITZ, BRETT  
15303 AMBERLY DR STE B  
TAMPA, FL 336472308 US

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

WEINBERG, ROSE  
10403 ROCKY RIVER COURT  
TAMPA, FL 33647 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: ROSE WEINBERG

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MARKOWITZ, BRETT  
Address: 15303 AMBERLY DR STE B  
City-St-Zip: TAMPA, FL 336472308 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WEINBERG, ROSE  
Address: 10403 ROCKY RIVER COURT  
City-St-Zip: TAMPA, FL 33647

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: ROSE WEINBERG

MGR

04/28/2009

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