2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L08000058125

Entity Name: HUSH LACE WIGS LLC.

Current Principal Place of Business:

190 NE 199TH ST
N MIAMI BEACH, FL, 33179

New Principal Place of Business:

190 NE 199TH ST
SUITE 101
N MIAMI BEACH, FL 33179

Current Mailing Address:

760 NE 168TH ST
N MIAMI BEACH, 33162

New Mailing Address:

760 NE 168TH ST
N MIAMI BEACH, FL 33162

FEI Number: 59-0102315 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOLIERE, SHIRLEY G
3445 SW 62ND WAY
MIRAMAR,, FL 33023 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: MGR ( ) Delete
Name: MOLIERE, SANDRA
Address: 760 NE 168TH ST
City-St-Zip: N MIAMI BEACH, FL 33162

Title: MGRM ( ) Delete
Name: MOLIERE, SHIRLEY G
Address: 3445 SW 62ND WAY
City-St-Zip: MIRAMAR, FL 33023

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: SANDRA MOLIERE MGR 04/30/2009

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