

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000064894

Entity Name: PINK CHIX COUTURE, LLC

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

6314 CYPRESS GARDENS BLVD.  
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

6314 CYPRESS GARDENS BLVD.  
WINTER HAVEN, FL 33884

**New Mailing Address:**

FEI Number: 26-2915665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JAQUEZ, KRISTIN M  
2307 LILY PAD LANE  
KISSIMMEE, FL 34743 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  
Name: JAQUEZ, RENE'  
Address: 2307 LILY PAD LANE  
City-St-Zip: KISSIMMEE, FL 34743

Title: MGR  
Name: JONES, KELLY A  
Address: 729 TERRANOVA AVENUE  
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGR  
Name: JAQUEZ, KRISTIN  
Address: 6314 CYPRESS GARDENS BLVD.  
City-St-Zip: WINTER HAVEN, FL 33884

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: KRISTIN JAQUEZ

OWNE

04/22/2010

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