

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066385

FILED  
Mar 21, 2011  
Secretary of State

Entity Name: OLIVIA FLAWLESS LOOK LLC

**Current Principal Place of Business:**

225 MORTON LANE  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

225 MORTON LANE  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KLEBANOFF, OLIVIA-THUY N OWNER  
225 MORTON LANE  
WINTER SPRINGS, FL 32708 US

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

KLEBANOFF, OLIVIA-THUY N  
225 MORTON LANE  
WINTER SPRINGS, FL 32708 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: THUY NGAN KLEBANOFF

03/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KLEBANOFF, OLIVIA-THUY N  
Address: 225 MORTON LANE  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM  
Name: KLEBANOFF, OLIVIA-THUY N OWNER  
Address: 225 MORTON LANE  
City-St-Zip: WINTER SPRINGS, FL 32708

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Address: 225 MORTON LANE  
City-St-Zip: WINTER SPRINGS, FL 32708

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: THUY NGAN KLEBANOFF

MGRM

03/21/2011

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