2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089204

Entity Name: ABSOLUTE LIFESTYLE LLC

9858 CLINT MOORE ROAD

BOCA RATON, FL 33496

Address:

City-St-Zip:

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place	New Principal Place of Business:	
9858 CLINT MOORE ROAD C-111-111 BOCA RATON, FL 33496			
Current Mailing Address:	New Mailing Address:		
9858 CLINT MOORE ROAD C-111-111 BOCA RATON, FL 33496			
FEI Number: 26-3423061 FEI Number Applied For () FI In accordance with s. 607.193(2)(b), F.S., the limited liability compan	El Number Not Applicable() y did not receive the prior notice	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	rent Registered Agent: Name and Address of New Registered Agent:		
AVERINA, ILONA 9858 CLINT MOORE ROAD C-111-111 BOCA RATON, FL 33496 US			
The above named entity submits this statement for the purpoin the State of Florida.	ose of changing its registered	d office or registered agent, or both	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:	ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: MGR () Delete Name: AVERINA, ILONA	Title: Name:	() Change () Addition	

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: ILONA AVERINA MGR 05/01/2009