

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092339

Entity Name: MON AMOUR FASHIONS, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

5900 N.W. 97TH AVE.
SUITE 11
MIAMI, FL 33178 US

New Principal Place of Business:

12704 S.W. 44TH TERRACE
MIAMI, FL 33175 US

Current Mailing Address:

12704 S.W. 44TH TERRACE
MIAMI, FL 33175 US

New Mailing Address:

FEI Number: 90-0416319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUGH, JOLIE A
12704 S.W. 44TH TERRACE
MIAMI, FL 33175 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: FERNANDEZ, JOSE
Address: 12704 S.W. 44TH TERRACE
City-St-Zip: MIAMI, FL 33175 US

Title: MGR () Delete
Name: NAJJAR, SAMIR
Address: P.O. BOX 690211
City-St-Zip: ORLANDO, FL 32869 US

Title: MGR () Delete
Name: MARTINEZ, CHRISTOPHER
Address: 3721 N.W. 95TH TERRACE #1702
City-St-Zip: SUNRISE, FL 33351 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S T (X) Change () Addition
Name: PUGH, JOLIE
Address: 12704 S.W. 44TH TERRACE
City-St-Zip: MIAMI, FL 33175 US

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: JOLIE A. PUGH

S T

04/29/2009

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