

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092797

FILED  
Aug 04, 2009  
Secretary of State

Entity Name: INVENTIA COSMETICS,LLC

**Current Principal Place of Business:**

1500 SE 3RD COURT  
SUITE 108  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

1500 SE 3RD COURT  
SUITE 108  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

FEI Number: 26-3474798      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

TORKOWSKI, ALEXANDRA  
1500 SE 3RD COURT  
SUITE 108  
DEERFIELD BEACH, FL 33441 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGMR ( ) Delete  
Name: KALECKI, LESZEK  
Address: 1500 SE 3RD COURT,SUITE 108  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: MGMR ( ) Delete  
Name: TORKOWSKI, ALEXANDRA  
Address: 365 SW 16TH STREET  
City-St-Zip: BOCA RATON, FL 33432 US

**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: ALEXANDRA TORKOWSKI

MGR

08/04/2009

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