

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000017819

Entity Name: STYLES BY GINA, LLC

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1583 CARRINGTON AVENUE  
WINTER SPRINGS, FL 32708 US

**New Principal Place of Business:**

**Current Mailing Address:**

1583 CARRINGTON AVENUE  
WINTER SPRINGS, FL 32708 US

**New Mailing Address:**

FEI Number: 26-4317204

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOLFA, GINA  
1583 CARRINGTON AVENUE  
WINTER SPRINGS, FL 32708 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: MGMR  
Name: TOLFA, GINA  
Address: 1583 CARRINGTON AVENUE  
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: GINA TOLFA

MGMR

03/28/2011

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