

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000032444

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** GAUTIER USA FRANCHISES, LLC.

**Current Principal Place of Business:**

3155 N. ANDREWS AVENUE EXTENSION  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

3155 N. ANDREWS AVENUE EXTENSION  
POMPANO BEACH, FL 33064

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

FREDERIC BARTHE PA  
2455 E. SUNRISE BLVD.  
602  
FORT LAUDERDALE, FL 33304 US

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

FREDERIC BARTHE PA  
ONE E. SUNRISE BLVD.  
700  
FORT LAUDERDALE, FL 33301 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: FREDERIC M BARTHE, ESQ.

04/28/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SOULARD, DOMINIQUE  
Address: 3155 N. ANDREWS AVENUE EXTENSION  
City-St-Zip: POMPANO BEACH, FL 33064

Title: MGR  
Name: SOULARD, DAVID  
Address: 3155 N. ANDREWS AVENUE EXTENSION  
City-St-Zip: POMPANO BEACH, FL 33064

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: DAVID SOULARD

MGR

04/28/2010

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