

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000041540

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** ANTISPARKLE APPAREL LLC

**Current Principal Place of Business:**

12936 WATERFORD WOOD CIR  
304  
ORLANDO, FL 32828 US

**New Principal Place of Business:**

**Current Mailing Address:**

12936 WATERFORD WOOD CIR  
304  
ORLANDO, FL 32828 US

**New Mailing Address:**

PO BOX 780157  
ORLANDO, FL 32878 US

**FEI Number:** 26-4651401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MALCOLM, MONIQUE E  
12936 WATERFORD WOOD CIR  
304  
ORLANDO, FL 32828 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  
Name: MALCOLM, MONIQUE E  
Address: 12936 WATERFORD WOOD CIR #304  
City-St-Zip: ORLANDO, FL 32828 US

Title: MGRM  
Name: DARRINGTON, GLOVER  
Address: 12936 WATERFORD WOOD CIR 304  
City-St-Zip: ORLANDO, FL 32828 US

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: MONIQUE MALCOLM

MGR

01/16/2012

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