

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000045614

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** PRAMA WEAR LLC

**Current Principal Place of Business:**

4459 DANIELSON DRIVE  
LAKE WORTH, FLORIDA, 33467 US

**New Principal Place of Business:**

4459 DANIELSON DRIVE  
LAKE WORTH, FL 33467 US

**Current Mailing Address:**

4459 DANIELSON DRIVE  
LAKE WORTH, FLORIDA, 33467 US

**New Mailing Address:**

4459 DANIELSON DRIVE  
LAKE WORTH, FL 33467 US

**FEI Number:** 26-4839792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROOKS, STACY  
4459 DANIELSON DRIVE  
LAKE WORTH, FL 33467 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: BROOKS, STACY  
Address: 4459 DANIELSON DRIVE  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: MGR  
Name: FERRO, ANN MARIE  
Address: 9508 GRANITE RIDGE LANE  
City-St-Zip: WEST PALM BEACH, FL 33411 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:** STACY BROOKS

MGR

02/16/2010

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