

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000056536

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Entity Name:** LUXURY CONCIERGE SERVICES LLC

**Current Principal Place of Business:**

1420 NE 163RD ST 3305  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

1420 NE 163RD STREET  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

P O BOX 610160  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

COHEN, NICOLETTE  
1420 NE 163RD ST  
NORTH MIAMI BEACH, FL 33162    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:                      COHEN, NICOLETTE  
Address:                      1420 NE 163RD ST  
City-St-Zip:                      NORTH MIAMI BEACH, FL 33162 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: NICOLETTE COHEN                      MGR                      02/02/2011

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