

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000070026

Entity Name: SUGARPLUMKIN BOUTIQUE, LLC

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

**Current Principal Place of Business:**

6360 SIMMONS ST  
MIAMI LAKES, FL 33014 US

**New Principal Place of Business:**

6401 MAIN STREET  
APT. 101  
MIAMI LAKES, FL 33014 US

**Current Mailing Address:**

6360 SIMMONS ST  
MIAMI LAKES, FL 33014 US

**New Mailing Address:**

6401 MAIN STREET  
APT. 101  
MIAMI LAKES, FL 33014 US

FEI Number: 27-0848865

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOISVERT, ERIN  
6360 SIMMONS ST  
MIAMI LAKES, FL 33014 US

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

BOISVERT, ERIN  
6401 MAIN STREET  
APT. 101  
MIAMI LAKES, FL 33014 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: \_\_\_\_\_

04/28/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOISVERT, ERIN  
Address: 6401 MAIN STREE, APT. 101  
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: MGRM  
Name: BOISVERT, REMI  
Address: 6401 MAIN STREET, APT. 101  
City-St-Zip: MIAMI LAKES, FL 33014 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: ERIN BOISVERT

MRS.

04/28/2010

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