

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000117149

Entity Name: KIDSKISSES, LLC

**FILED**  
**Feb 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6580 ALLISON ROAD  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

6580 ALLISON ROAD  
MIAMI BEACH, FL 33141

**New Mailing Address:**

FEI Number: 27-1784682

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABECKJERR, RUTH  
3772 NE 166TH STREET  
NORTH MIAMI BEACH, FL 33160 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: MGRM  
Name: ABECKJERR, RUTH  
Address: 3772 NE 166TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM  
Name: BENSABAT, SANDRINE  
Address: 6580 ALLISON ROAD  
City-St-Zip: MIAMI BEACH, FL 33141

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: SANDRINE BENSABAT

MGRM

02/04/2011

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