

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000075456

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** EVERYTHING THAT SPARKLES, LLC.

**Current Principal Place of Business:**

299 N. RIVERSIDE DRIVE  
UNIT 404  
POMPANO BEACH, FL 33062 US

**New Principal Place of Business:**

49 N. FEDERAL HWY.  
UNIT 298  
POMPANO BEACH, FL 33062 US

**Current Mailing Address:**

299 N. RIVERSIDE DRIVE  
UNIT 404  
POMPANO BEACH, FL 33062 US

**New Mailing Address:**

49 N. FEDERAL HWY.  
UNIT 298  
POMPANO BEACH, FL 33062 US

**FEI Number:** 27-2973788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERRI, SARAH A MS  
299 N. RIVERSIDE DRIVE  
UNIT 404  
POMPANO BEACH, FL 33062 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: SCHMID, LAUREN R MS  
Address: 299 N. RIVERSIDE DRIVE, UNIT 404  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: MGRM  
Name: PERRI, SARAH A MS  
Address: 299 N. RIVERSIDE DRIVE, UNIT 404  
City-St-Zip: POMPANO BEACH, FL 33062 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: SARAH PERRI

MGRM

04/20/2012

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