

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000083021

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** BEAUX HOME IMPROVEMENT SERVICES LLC

**Current Principal Place of Business:**

8214 AMBROSE COVE WAY  
ORLANDO, FL 32819

**New Principal Place of Business:**

1878 MADISON IVY CIRCLE  
APOPKA, FL 32712

**Current Mailing Address:**

8214 AMBROSE COVE WAY  
ORLANDO, FL 32819

**New Mailing Address:**

1878 MADISON IVY CIRCLE  
APOPKA, FL 32712

**FEI Number:** 27-4083662

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEAUX, SHANI  
8214 AMBROSE COVE WAY  
ORLANDO, FL 32819 US

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

BEAUX, SHANI  
1878 MADISON IVY CIRCLE  
APOPKA, FL 32712 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: SHANI A. BEAUX

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BEAUX, MAXIMILIEN  
Address: 1878 MADISON IVY CIRCLE  
City-St-Zip: APOPKA, FL 32712

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: MAXIMILIEN BEAUX

MGRM

04/19/2011

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