

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000003600

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** OSUJI'S HAIR AND BEAUTY SUPPLY LLC

**Current Principal Place of Business:**

2285 EAST TAMiami TRAIL  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 110576  
NAPLES, FL 34108

**New Mailing Address:**

**FEI Number:** 27-4576580

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LONG, LANEATRICE  
533 104TH AVE. NORTH  
NAPLES, FL 34108 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: LONG, SHIRLEY  
Address: 612 11TH AVE., APT. 5  
City-St-Zip: FRANKLINTON, LA 70438

Title: MGRM  
Name: LONG, LANEATRICE  
Address: 533 104TH AVE.  
City-St-Zip: NAPLES, FL 34108

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: LANEATRICE LONG

MGRM

04/30/2012

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