

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000003686

**FILED**  
**Mar 22, 2012**  
**Secretary of State**

**Entity Name:** PERMANENT MAKEUP OF TAMPA, LLC

**Current Principal Place of Business:**

20012 OAK FLOWER AVE.  
TAMPA, FL 33647 US

**New Principal Place of Business:**

20012 OAKFLOWER AVE  
TAMPA, FL 33647 US

**Current Mailing Address:**

20012 OAK FLOWER AVE.  
TAMPA, FL 33647 US

**New Mailing Address:**

20012 OAKFLOWER AVE  
TAMPA, FL 33647 US

**FEI Number:** 27-4517174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHRAYBER, IRINA  
20012 OAK FLOWER AVE.  
TAMPA, FL 33647 US

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

SHRAYBER, IRINA  
20012 OAKFLOWER AVE  
TAMPA, FL 33647 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: IRINA SHRAYBER

03/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SHRAYBER, IRINA  
Address: 20012 OAKFLOWER AVE  
City-St-Zip: TAMPA, FL 33647 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: IRINA SHRAYBER

MRG

03/22/2012

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