

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000068704

FILED
Apr 30, 2012
Secretary of State

Entity Name: IVORY SHORES COSMETICS LLC

Current Principal Place of Business:

3501 B NORTH PONCE DE LEON BLVD.
#325
ST.AUGUSTINE, FL 32084 US

New Principal Place of Business:

2246 REDFERN ROAD
JACKSONVILLE, FL 32207 US

Current Mailing Address:

3501 B NORTH PONCE DE LEON BLVD.
#325
ST.AUGUSTINE, FL 32084 US

New Mailing Address:

2246 REDFERN ROAD
JACKSONVILLE, FL 32207 US

FEI Number: 45-2535300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
SUITE A
TAMPA, FL 33612 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: GLOCKER, SAMUEL R
Address: 2246 REDFERN ROAD
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR
Name: JOHNSON, JEFFREY A
Address: 3501 B NORTH PONCE DE LEON BLVD. #325
City-St-Zip: ST.AUGUSTINE, FL 32084 US

Title: MGR
Name: GREEN, ERIC M
Address: 3501 B NORTH PONCE DE LEON BLVD. #325
City-St-Zip: ST.AUGUSTINE, FL 32084 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: SAMUEL R GLOCKER

MAN

04/30/2012

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