

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000085645

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** SUPREME INTERNATIONAL SERVICES, LLC

**Current Principal Place of Business:**

1140 NE 163 STREET, STE. 24  
MIAMI, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

850 NW 199 STREET  
MIAMI, FL 33169

**New Mailing Address:**

**FEI Number:** 45-3235890

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FAVEUR, JEAN ANTOINE  
850 NW 199 STREET  
MIAMI, FL 33169 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:** FAVEUR, JEAN ANTOINE  
**Address:** 850 NW 199 STREET  
**City-St-Zip:** MIAMI, FL 33169

**Title:** MGRM  
**Name:** ST JOUR, SONNETTE  
**Address:** 850 NW 199 STREET  
**City-St-Zip:** MIAMI, FL 33169

**Title:** MGRM  
**Name:** JEUDY, EVELT  
**Address:** 1140 NE 163 STREET, STE. 24  
**City-St-Zip:** NORTH MIAMI BEACH, FL 33162

**Title:** MGRM  
**Name:** DANIEL T, GEORGES  
**Address:** 819 NE 199 STREET, APT 208  
**City-St-Zip:** MIAMI, FL 33169

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:** JEAN ANTOINE FAVEUR

MGR

03/20/2012

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