

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000130864

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** TROPICAL BREEZE BOUTIQUE LLC

**Current Principal Place of Business:**

761 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

505 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

761 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

505 DODECANESE BOULEVARD  
TARPON SPRINGS, FL 34689

**FEI Number:** 45-3830226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRAZIER, HEATHER  
11334 COLLINGSWOOD STREET  
SPRING HILL, FL 34608 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: MGRM  
Name: DELAPORTAS, VISSARIO  
Address: 1208 ROLLINGWOOD DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

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: VISSARIO DELAPORTAS

MGRM

04/23/2012

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