

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000139842

Entity Name: PERFECT CADEAU, LLC.

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

79 NW 92ND STREET  
MIAMI, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

79 NW 92ND STREET  
MIAMI, FL 33150

**New Mailing Address:**

FEI Number: 45-4031231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOHNSON, PATRICIA A  
16850 COLLINS AVE  
#112543  
SUNNY ISLES, FL 33160 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: JOHNSON, PATRICIA A  
Address: 79 NW 92ND ST  
City-St-Zip: MIAMI, FL 33150

Title: MGRM  
Name: JOHNSON, ERNEST T  
Address: 79 NW 92ND ST  
City-St-Zip: MIAMI, FL 33150

Title: MGRM  
Name: SANCHEZ, VIRGINIA R  
Address: 6195 NW 186 ST APT 406  
City-St-Zip: MIAMI, FL 33015

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: PATRICIA JOHNSON

MGRM

02/08/2012

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