

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000439

Entity Name: OFRA COSMETICS, LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

2200 NW 32 STREET
#200
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2200 NW 32 STREET
#200
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 59-3556109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GAITO, OFRA
2200 NW 32 STREET, SUITE #200
POMPANO BEACH, FL 33069 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 () Delete
Name: GAITO, OFRA
Address: 510 NW 107 AVE
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Delete
Name: GAITO, DAVID
Address: 510 NW 107 AVE
City-St-Zip: PLANTATION, FL 33324

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GAITO, OFRA
Address: 2200 NW 32ND STREET, SUITE 200
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM (X) Change () Addition
Name: GAITO, DAVID
Address: 2200 NW 32ND STREET, SUITE 200
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM () Change (X) Addition
Name: SCHECHTER, RUSSELL
Address: 2200 NW 32ND STREET, SUITE 200
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: OFRA GAITO

MGRM

05/01/2006

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