


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2007 08:00 AM
Secretary of State

DOCUMENT # M02000000098 1. Entity Name LITTLE ME RETAIL STORES OF FLORIDA, LLC	
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Principal Place of Business 10801 CORKSCREW RD., SUITE 339 ESTERO, FL 33928	Mailing Address 12101 UPPER POTOMAC INDUSTRIAL PARK CUMBERLAND, MD 21502
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01032007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2267000	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD., SUITE 101 TALLAHASSEE, FL 32301-2960
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LITTLE ME RETAIL STORES, LLC 12101 UPPER POTOMAC INDUSTRIAL PARK CUMBERLAND, MD 21502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COB- SCHWAB, SAMUEL C 44 WEST 77TH STREET APT. 10W NEW YORK, NY 10024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS SCHWAB, DOUGLAS S 835 MACDONALD TERRACE CUMBERLAND, MD 21502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPF STUART, RONALD W P.O. BOX 238 DAVIS, WV 26260
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000599459 01/25/07-80029-003.50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Ronald W. Stuart 1-15-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #