

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Sep 14, 2004 8:00 am**  
**Secretary of State**

09-14-2004 90067 025 \*\*\*\*50.00

<b>DOCUMENT # M05000004684</b>					
<b>1. Entity Name</b> TOMMY BAHAMA TAMPA, LLC					
<b>Principal Place of Business</b> 1623 SNOW AVE. TAMPA, FL 33606			<b>Mailing Address</b> 1623 SNOW AVE. TAMPA, FL 33606		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b> Oxford Industries, Inc. Suite, Apt. #, etc. 222 Piedmont Ave. NE			
Suite, Apt. #, etc.		City & State Atlanta, GA		08232004    Chg-LLC    CR2E083 (10/03)	
City & State		City & State Atlanta, GA		<b>4. FEI Number</b> 13-4101625	
Zip		Country USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>Filing Fee is \$50.00 Due by September 8, 2004</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOMMY BAHANAA R&R HOLDINGS INC 1871 AVE OF THE AMERICAS NEW YORK, NY 10018	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Tommy Bahama R&R Holdings, Inc. 222 Piedmont Ave., NE Atlanta, GA 30308 President Lanier, J. Hicks 222 Piedmont Ave, NE Atlanta, GA 30308 VP & Treasurer Lanier, Jr., J. Reese 222 Piedmont Ave., NE Atlanta, GA 30308 VP Cunubo III, Thomas C. 222 Piedmont Ave., NE Atlanta, GA 30308 VP & Secretary Mazzone, Dominic C. 222 Piedmont Ave., NE Atlanta, GA 30308
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<b>11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.</b>					
<b>SIGNATURE:</b> <u>Dominic Mazzone VP &amp; Sec.</u> <u>9/17/04</u> <u>404-659-2424</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE    Date    Daytime Phone #</small>					