2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056364

Entity Name: L'BIJOU INC

FILED Jul 17, 2007 Secretary of State

Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
1731 WEST 11TH STREET JACKSONVILLE, FL 32209						
Current Ma	ailing Address	:	New Maili	New Mailing Address:		
	T 11TH STREE /ILLE, FL 3220			P.O. BOX 28464 JACKSONVILLE, FL 32226		
FEI Number:	90-0148690	FEI Number Applied For () FEI N	umber Not Appl	icable ()	Certificate of Status Desired (X)	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
HAWKINS, PATRICIA G 1731 WEST 11TH STREET JACKOSNVILLE, FL 32209 US The above named entity submits this statement for the purpose of shanging its registered effice or registered agent, or both						
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		
		2)(b), F.S., the corporation did not receiv Trust Fund Contribution ().	e the prior notic	e.		
	AND DIRECT	• •	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () [HAWKINS, PATR 1038-5 DUNN AV JACKSONVILLE,	E PMB#139	Title: Name: Address: City-St-Zip:	CEO (X HAWKINS, PAT 5627 FINCH AN JACKSONVILL	VE.	
Title: Name: Address: City-St-Zip:	PRES ()[HAYNES, PATRII 3018 WEST 1ST JACKSONVILLE,	STREET	Title: Name: Address: City-St-Zip:	PRES (X HAYES, PATRI 3018 WEST 18 JACKSONVILL	ST STREET	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	VP (BIGHAM, JANI' 3018 WEST 18 JACKSONVILL	ST STREET	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	PRES (ADAMS, TIFFA 1731 WEST 11 JACKSONVILL	ITH STREET	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAWKINS PATRICIA G. CEO 07/17/2007