

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000004494

Entity Name: MADAME EXQUISE LIMITED LIABILITY COMPANY**Current Principal Place of Business:**6380 COLONIAL GRAND DRIVE
102
TAMPA, FL 33647**Current Mailing Address:**P.O. BOX 46308
TAMPA, FL 33646 US**FEI Number:** 46-4476096**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAINTVISTAL, DORLINE
6380 COLONIAL GRAND DRIVE
102
TAMPA, FL 33647 US*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**Authorized Person(s) Detail :**

Title	MGR
Name	SAINTVISTAL, DORLINE
Address	6380 COLONIAL GRAND DR. 102
City-State-Zip:	TAMPA FL 33647
Title	MGR
Name	POLLOCK, BRITTANY
Address	6380 COLONIAL GRAND DR. 102
City-State-Zip:	TAMPA FL 33647

Title	MGR
Name	JEAN, JESSICA
Address	10307 VENITIA REAL AVE 210
City-State-Zip:	TAMPA FL 33647
Title	MGR
Name	TELFORT, SAGATHE
Address	2769 WESTBROOK CT.
City-State-Zip:	TALLAHASSEE FL 32303

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRITTANY POLLOCK

MGR

02/11/2016

Electronic Signature of Signing Authorized Person(s) Detail_____
Date