

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000061

FILED
Apr 25, 2008
Secretary of State

Entity Name: DESIGN MIAMI, LLC

Current Principal Place of Business:

3841 N. E. 2ND AVENUE
SUITE 400
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

3841 N. E. 2ND AVENUE
SUITE 400
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 65-0987872 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINS, CRAIG
3841 N. E. 2ND AVENUE
SUITE 400
MIAMI, FL 33137 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: DESIGN MIAMI, INC.,
Address: 3841 N. E. 2ND AVENUE, SUITE 400
City-St-Zip: MIAMI, FL 33137 US

Title: MGRM () Delete
Name: ROBINS, CRAIG MR
Address: 3841 N. E. 2ND AVENUE, SUITE 400
City-St-Zip: MIAMI, FL 33137 US

Title: MGR () Delete
Name: GRETENSTEIN, STEVEN
Address: 3841 N. E. 2ND AVENUE, SUITE 400
City-St-Zip: MIAMI, FL 33137 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: STEVEN GRETENSTEIN MGR 04/25/2008

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