

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033176

FILED  
May 07, 2008  
Secretary of State

Entity Name: TOOKE DESIGN & CONSULTING GROUP LLC

**Current Principal Place of Business:**

318 INDIAN TRACE #243  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

318 INDIAN TRACE #243  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 20-0197980      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MARTINEZ, MARIA A  
318 INDIAN TRACE, STE 629  
WESTON, FL 33326      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

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM      ( ) Delete  
Name: MARTINEZ, MARIA A  
Address: 318 INDIAN TRACE, SUITE 629  
City-St-Zip: WESTON, FL 33326

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

Title: MGRM      ( ) Delete  
Name: MARTINEZ, ANTONIO  
Address: 318 INDIAN TRACE, SUITE 629  
City-St-Zip: WESTON, FL 33326

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

Title: MGRM      ( ) Delete  
Name: CARUNCHO, MARIA C  
Address: 318 INDIAN TRACE, SUITE 629  
City-St-Zip: WESTON, FL 33326

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: MARIA ALICIA MARTINEZ

MGRM

05/07/2008

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