

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000000596

1. Entity Name
KDB DESIGN LLC

Principal Place of Business
4207 TRANQUILITY DRIVE
HIGHLAND BEACH FL 33487

Mailing Address
4207 TRANQUILITY DRIVE
HIGHLAND BEACH FL 33487

FILED

01 APR -9 AM 7:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

7491 N. FEDERAL HIGHWAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

C-5 #288

City & State

City & State

BOCA RATON, FL

Zip

Country

33487

USA

4. FEI Number

05-0978086

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.

343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

KERSTIN D. BERGER

Street Address (P.O. Box Number is Not Acceptable)

4207 TRANQUILITY DRIVE

City

HIGHLAND BEACH

FL

33487

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/05/01

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10.

ADDITIONS/CHANGES

NAME KERSTIN D. BERGER ☐ Delete
STREET ADDRESS 4207 TRANQUILITY DRIVE
CITY-ST-ZIP HIGHLAND BEACH, FL 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

04/05/01 561-276742

CR2E083 (11/00)