

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002050

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** CONSTRUCTURE DESIGN GROUP, L.L.C.

**Current Principal Place of Business:**

2649 NW 49TH STREET  
BOCA RATON, FL 33434

**New Principal Place of Business:**

1200 CLINT MOORE ROAD  
SUITE 10  
BOCA RATON, FL 33487

**Current Mailing Address:**

2649 NW 49 STREET  
BOCA RATON, FL 33434

**New Mailing Address:**

**FEI Number:** 65-0988229

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEEDS, STEVEN  
2649 NW 49 STREET  
BOCA RATON, FL 33434 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: LEEDS, STEVEN  
Address: 2649 NW 49 STREET  
City-St-Zip: BOCA RATON, FL 33434

Title: MGRM ( ) Delete  
Name: WILLY BONKERS, INC.  
Address: 2649 NW 49 STREET  
City-St-Zip: BOCA RATON, FL 33434

**ADDITIONS/CHANGES:**

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 LEEDS

MGRM

04/29/2009

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