

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001415

Entity Name: CDS RETAIL, LLC

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

95 NE 4TH AVE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

95 NE 4TH AVE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CDS INTERNATIONAL HOLDINGS, INC
95 NE 4TH AVE
DELRAY BEACH, FL 33483 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: MGR () Delete
Name: POVEDANO, KIMBERLY K PRES
Address: 95 NE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR () Delete
Name: MILMOE, WILLIAM H TREAS
Address: 95 NE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR (X) Delete
Name: VERMILYEA, KAREN SEC
Address: 95 NE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MILMOE, WILLIAM H TREAS
Address: 95 NE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGR (X) Change () Addition
Name: VERMILYEA, KAREN SEC
Address: 95 NE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

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

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN VERMILYEA

MGR

04/27/2006

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