

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011862

FILED  
Sep 05, 2007  
Secretary of State

Entity Name: CHOMODESIGN LLC

**Current Principal Place of Business:**

3111 W. MLK JR BLVD  
SUITE 100  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2546 6TH AVE SO  
SAINT PETERSBURG, FL 33712

**New Mailing Address:**

FEI Number: 01-0680921      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:**

MOSLEY, CHON  
2546 6TH AVE SO  
SAINT PETERSBURG, FL 33712      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: MOSLEY, CHON  
Address: 2546 6TH AVE SO  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: MGRM      ( ) Delete  
Name: KEYS, BARBARA M  
Address: 2546 6TH AVE. SO.  
City-St-Zip: ST. PETE, FL 33712

Title: MGRM      ( ) Delete  
Name: REID, LEONNE  
Address: 6804 TIMBERLAND DR. W.  
City-St-Zip: TAMPA, FL 33615

**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: MOSLEY, CHON

MGRM

09/05/2007

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