

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000014920

1. Entity Name
GEIGER & CHU DESIGN GROUP, L.L.C.



Principal Place of Business
145 CALLE LARGO
HOLLYWOOD, FL 33021

Mailing Address

145 CALLE LARGO
HOLLYWOOD, FL 33021

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03102004 Chg-LLC CR2E083 (10/03)

4. FEI Number

55-0830162

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NICHOLLS, GREGG E
1900 NW CORPORATE BLVD
#400E
BOCA RATON, FL 33431

Name *Denise Chu*

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

224 SE 10th Ave

*DEPA
Pompano Beach FL*

Zip Code *33060*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Denise Chu

(NOTE: Registered Agent signature required when reinstating)

3-10-04

DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10.

ADDITIONS/CHANGES

TITLE MGRM
NAME GEIGER, RACHAEL
STREET ADDRESS 145 CALLE LARGO
CITY-ST-ZIP HOLLYWOOD, FL 33021

Delete

TITLE

Change

Addition

TITLE MGRM
NAME CHU, DENISE
STREET ADDRESS 224 SE 10TH AVE
CITY-ST-ZIP POMPANO BEACH, FL 33060

Delete

TITLE

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE

Change

Addition

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NAME
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CITY-ST-ZIP

Delete

TITLE

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE

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:

Denise Chu

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

Date

Daytime Phone #

954-941

0609

**FILED
Mar 15, 2004 8:00 am
Secretary of State**

03-15-2004 90431 002 ****50.00

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