

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020264

Entity Name: SILVER LEAF DESIGNS LLC

FILED
Apr 06, 2005
Secretary of State

Current Principal Place of Business:

4995 NW 72 AVE
SUITE 401
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

4995 NW 72 AVE
SUITE 401
MIAMI, FL 33166

New Mailing Address:

FEI Number: 35-2207392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAZAR, CAMILO
4995 NW 72ND AVE
#401
MIAMI, FL 33166 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/MEMBERS:

Title: P () Delete
Name: SALAZAR, CAMILO
Address: 12730 SW 119TH ST
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: BROWN, TROY
Address: 1008 NW 8TH ST
City-St-Zip: MIAMI, FL 33136

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SALAZAR, CAMILO
Address: 12730 SW 119TH ST
City-St-Zip: MIAMI, FL 33186

Title: MGRM (X) Change () Addition
Name: BROWN, TROY
Address: 1008 NW 8TH ST
City-St-Zip: MIAMI, FL 33136

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAMILO SALAZAR

MGR

04/06/2005

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