

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043665

Entity Name: CONCEPT DESIGN LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2444 NW 7TH PLACE  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

2444 NW 7TH PLACE  
MIAMI, FL 33127

**New Mailing Address:**

FEI Number: 20-0594187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CIAMMARICONE, GABRIELE J  
10039 SW 156 AV  
MIAMI, FL 33196 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  
Name: CIAMMARICONE, GABRIELE J  
Address: 10039 SW 156 AV  
City-St-Zip: MIAMI, FL 33196

Title: MGR  
Name: CIAMMARICONE, PAULA B  
Address: 10039 SW 156 AV  
City-St-Zip: MIAMI, FL 33196

I hereby 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: GABRIELE CIAMMARICONE

MGR

04/30/2010

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