

**2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000047910

**FILED**  
**Jun 02, 2006**  
**Secretary of State****Entity Name:** SOUTH FLORIDA DESIGNERS, LLC**Current Principal Place of Business:**5082 NW 116TH AVE  
DORAL, FL 33178 US**New Principal Place of Business:****Current Mailing Address:**5082 NW 116TH AVE  
DORAL, FL 33178 US**New Mailing Address:****FEI Number:** 06-1714059**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DE ARMAS, RODOLFO  
5082 NW 116TH AVE  
DORAL, FL 33178 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: DE ARMAS, RODOLFO  
Address: 5082 NW 116TH AVE  
City-St-Zip: DORAL, FL 33178 USTitle: MGR ( ) Delete  
Name: DE ARMAS, MARIFFER  
Address: 5082 NW 116TH AVE  
City-St-Zip: DORAL, FL 33178 USTitle: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: MGR ( ) Change (X) Addition  
Name: GUERRERO, EDGAR  
Address: 5082 NW 116TH AVE  
City-St-Zip: DORAL, FL 33178

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: EDGAR GUERRERO

MGR

06/02/2006

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