2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000056185

1. Entity Name
BOCA RATON DESIGN & DEVELOPMENT GROUP, LLC

Principal Place of Business	Mailing Address
105 EAST PALMETTO PARK ROAD BOCA RATON, FL 33432	105 EAST PALMETTO PARK ROAD BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

D'ALMEIDA, ARTHUR B
105 EAST PALMETTO PARK ROAD
BOCA RATON, FL 33432

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000831415
02/27/08-80018-008 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	D'ALMEIDA, ARTHUR B MGRM
STREET ADDRESS	105 EAST PALMETTO PARK ROAD
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	MGRM
NAME	D'ALMEIDA, FRANCES M MGRM
STREET ADDRESS	105 EAST PALMETTO PARK ROAD
CITY-ST-ZIP	BOCA RATON, FL 33432
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Arthur D'Almeida 1-8-08 3684674
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #