

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039464

Entity Name: VECXEL DESIGN STUDIO L.L.C.

FILED
Feb 20, 2006
Secretary of State

Current Principal Place of Business:

210 S.W. 9TH STREET, APT #E2
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 801722
AVENTURA, FL 33280

New Mailing Address:

FEI Number: 80-0111923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUSTE, SAMUEL
210 S.W. 9TH STREET, APT #E2
HALLANDALE, FL 33009 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: MGRM () Delete
Name: JUSTE, SAMUEL
Address: 500 NE 26 STREET, APT. 3B
City-St-Zip: MIAMI, FL 33137

Title: MGRM () Delete
Name: CHATFIELD, GOTTFRIED
Address: 210 SW 9TH STREET, APT. E2
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SAMUEL JUSTE

MGRM

02/20/2006

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