2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 12, 2006 08:00 AM Secretary of State DOCUMENT # L04000083819 XODESIGNGROUP, LLC Mailing Address Principal Place of Business 1410 WEST 24 ST. 1410 WEST 24 ST. MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140 01062006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied Far 4. FEI Number 20-1894860 Not Applicab \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE PETZOLD, ULRICH HANS 1410 WEST 24 ST. MIAMI BEACH, FL 33140 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS g, MGR אודנד PETZOLD, ULRICH HANS NAME STREET ADDRESS 1410 WEST 24 ST. CITY-ST-ZIP MIAMI BEACH, FL. 33140 1100000384131 TITLE 01/13/06-80028-021 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling 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 accourage 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP