

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007947

Entity Name: NDESIGNS, LLC

FILED  
Jan 11, 2007  
Secretary of State

## Current Principal Place of Business:

8941 YEARLING DR.  
LAKE WORTH, FL 33467 US

## New Principal Place of Business:

1396 BLUE CLOVER LANE  
WEST PALM BEACH, FL 33415 US

## Current Mailing Address:

P.O. BOX 541852  
LAKE WORTH, FL 33454 US

## New Mailing Address:

FEI Number: 20-2143467      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NYSTROM, NICOLE K  
8941 YEARLING DR.  
LAKE WORTH, FL 33454 US

## Name and Address of New Registered Agent:

BOLDEN, NICOLE K  
1396 BLUE CLOVER LANE  
WEST PALM BEACH, FL 33415 US

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: NICOLE K. BOLDEN

01/11/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: OWNE ( ) Delete  
Name: NYSTROM, NICOLE K DESIGNE  
Address: P.O . BOX 541852  
City-St-Zip: LAKE WORTH, FL 33454 US

## ADDITIONS/CHANGES:

Title: OWNE (X) Change ( ) Addition  
Name: BOLDEN, NICOLE K DESIGNE  
Address: P.O . BOX 541852  
City-St-Zip: LAKE WORTH, FL 33454 US

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: NICOLE K. BOLDEN

OWNE

01/11/2007

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