

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022787

Entity Name: ARKINES DESIGN, LLC

FILED  
Apr 05, 2006  
Secretary of State

## Current Principal Place of Business:

8601 NW 72 STREET  
MIAMI, FL 33166

## New Principal Place of Business:

5107 NW 106 AVE  
DORAL, FL 33178

## Current Mailing Address:

8601 NW 72 STREET  
MIAMI, FL 33166

## New Mailing Address:

5107 NW 106 AVE  
DORAL, FL 33178

FEI Number: 74-3141741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIREZ, FERNANDO  
8601 NW 72 ST  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

DALESSANDRIA, CARLOS  
5107 NW 106 AVE  
DORAL, FL 33178 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: CARLOS D'ALESSANDRIA

04/05/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: GUTIERREZ, ROSA I  
Address: 8601 NW 72 ST  
City-St-Zip: MIAMI, FL 33166

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: GUTIERREZ, ROSA I  
Address: 5107 NW 106 AVE  
City-St-Zip: DORAL, FL 33178

Title: MGR ( ) Change (X) Addition  
Name: D'ALESSANDRIA, CARLOS  
Address: 5107 NW 106 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: ROSA I GUTIERREZ

MGR

04/05/2006

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