## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000041513

**Entity Name: STONE IMAGE DESIGNS LLC** 

FILED May 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2172 PLATINUM ROAD, UNIT K 2172 PLATINUM ROAD, APOPKA, FL 32703 UNIT K

APOPKA, FL 32703

ADDITIONS/CHANGES:

GOMEZ, LUIS A

1740 STEFAN COLE LN

APOPKA, FL 32703 US

SUAREZ, ALEXANDER

ALTAMONTE SPRINGS, FL 32714

606 STANFORD DR

PROFESSIONAL ACCOUNTANTS & CONSULTANTS

(X) Change ( ) Addition

(X) Change ( ) Addition

Current Mailing Address: New Mailing Address:

2172 PLATINUM ROAD, UNIT K
2172 PLATINUM ROAD,
APOPKA, FL 32703
UNIT K
APOPKA, FL 32703

FEI Number: 20-2750265 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC 465 S VOLUSIA AVE SUITE C ORANGE CITY, FL 32763 US

65 S VOLUSIA AVE 2471 E. SEMORAN BLVD. UITE C APOPKA, FL 32703 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: DANIEL ALVAREZ 05/02/2008

Electronic Signature of Registered Agent Date

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

## MANAGING MEMBERS/MANAGERS:

itle: MGRM ( ) Delete

 Name:
 GOMEZ, LUIS A

 Address:
 1740 STEFAN COLE LN

 City-St-Zip:
 APOPKA, FL 32703 US

Title: MGRM () Delete
Name: SUAREZ, ALEXANDER
Address: 606 STANFORD DR

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S ( ) Change (X) Addition

 Name:
 Name:
 HEREDIA, ANGEL M

 Address:
 Address:
 623 MOCKINGBIRD LANE

 City-St-Zip:
 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify 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: LUIS A GOMEZ P T 05/02/2008