2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L05000080990

Entity Name: UNIQUE EVENT DESIGNERS LLC

Current Principal Place of Business:

210 SOUTH KINGS AVENUE
SUITE C
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

1615 THOMSPON RD
LITHIA, FL 33547 US

New Mailing Address:

1615 THOMPSON RD
LITHIA, FL 33547 US

FEI Number: 20-3347206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORIEGA, ELLANY MRS
1615 THOMPSON RD
LITHIA, FL 33547 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:	MRS	( ) Delete
Name:	NORIEGA, ELLANY	
Address:	1615 THOMPSON RD	
City-St-Zip:	LITHIA, FL 33547 US	
Title:	MRS	( ) Delete
Name:	NORIEGA, ELLANY CHAIRP	
Address:	1615 THOMPSON RD	
City-St-Zip:	LITHIA, FL 33547	

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 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: ELLANY NORIEGA MRS 04/30/2008

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