

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000099195

Entity Name: LDL CONSULTANTS, LLC

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

5930 NE 4 CT
MIAMI, FL 33137 US

New Principal Place of Business:

555 NE 34 ST
1107
MIAMI, FL 33137 US

Current Mailing Address:

5930 NE 4 CT
MIAMI, FL 33137 US

New Mailing Address:

555 NE 34 ST
1107
MIAMI, FL 33137 US

FEI Number: 20-3602991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEPIANE, LEONARDO D
5930 NE 4 CT
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

LEPIANE, LEONARDO D
555 NE 34 ST
1107
MIAMI, FL 33137 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: LEONARDO LEPIANE

01/31/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEPIANE, LEONARDO D
Address: 5930 NE 4 CT
City-St-Zip: MIAMI, FL 33137 US

Title: MGR () Delete
Name: MATTIA, MAYRA S
Address: 14612 SW 142 PL
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEPIANE, LEONARDO D
Address: 555 NE 34 ST, #1107
City-St-Zip: MIAMI, FL 33137 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LEONARDO LEPIANE

MGR

01/31/2007

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