2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110806

Address:

City-St-Zip:

Entity Name: CUBE DESIGN + RESEARCH, LLC

FILED Feb 11, 2006 Secretary of State

24 MT. VERNON STREET, APT. 501

Current Principal Place of Business:			New Principal Place of Business:		
791 TREMONT BOSTON, MA		STE. E311			
Current Mailing Address:			New Maili	ing Address:	
791 TREMONT BOSTON, MA	Г STREET, 02118	STE. E311			
FEI Number: 20-3801828 FEI Number Applied For ()		FEI Number Not App	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
BUSINESS FIL 1203 GOVERN TALLAHASSEI	IORS SQU	ARE BLVD., STE. 101			
The above name in the State of F		ubmits this statement for the	purpose of changing	its registered office or registered agent, or bo	th
SIGNATURE:					
	Electron	c Signature of Registered Ag	ent	Date	
MANAGING MEMI	BERS/MANA	GERS:	ADDITIONS/	CHANGES:	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition HART, JASON W MGRM 791 TREMONT STREET, SUITE E311 BOSTON, MA 02118	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition JOHNS, CHRISTOPHER A MGRM 865 21ST STREET, APT. 4 SAN DIEGO, CA 92102	
Title:	()	Delete	Title:	MGRM () Change (X) Addition	

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.

Address:

City-St-Zip: BOSTON, MA 02108

SIGNATURE: JASON HART MGRM 02/11/2006