

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116489

FILED
Mar 25, 2009
Secretary of State

Entity Name: LIGHT EMOTIONS DESIGN LLC

Current Principal Place of Business:

23904 STATE ROAD 54
102
LUTZ, FL 33559

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9277
MASARYKTOWN, FL 33559

New Mailing Address:

FEI Number: 57-1227435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRIMI, STEVEN J
16163 STEFANIK STREET
MASARYKTOWN, FL 34604 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: MGRM () Delete
Name: CRIMI, CORINE Y
Address: 16163 STEFANIK STREET
City-St-Zip: MASARYKTOWN, FL 33559

Title: MGRM () Delete
Name: CRIMI, STEVEN J
Address: 16163 STEFANIK STREET
City-St-Zip: MASARYKTOWN, FL 34604

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: CORINE CRIMI

MGRM

03/25/2009

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