2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# L06000026802

Entity Name: ACOSTA & VALDES, L.L.C.

Current Principal Place of Business:

% FINANCIAL DESIGNS, INC.
2500 NW 97 AVE SUITE 202
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

% FINANCIAL DESIGNS, INC.
2500 NW 97 AVE SUITE 202
DORAL, FL 33172

New Mailing Address:

FEI Number: 20-4485086 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALDES, JORGE A
2500 NW 97 AVE SUITE 202
DORAL, FL 33172 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: ACOSTA, FRANK M
Address: 5200 BLUE LAGOON DRIVE, SUITE 756
City-St-Zip: MIAMI, FL 33126

Title: MGRM ( ) Delete
Name: VALDES, JORGE A
Address: 2500 NW 97TH AVENUE, SUITE 202
City-St-Zip: DORAL, FL 33172

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 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: JORGE A VALDES MM 01/04/2007

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