

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036937

FILED
Jan 28, 2008
Secretary of State

Entity Name: FEDE DESIGNS, LLC

Current Principal Place of Business:

901 BRICKELL KEY BLVD.
704
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

901 BRICKELL KEY BLVD
704
MIAMI, FL 33131

New Mailing Address:

901 BRICKELL KEY BLVD.
704
MIAMI, FL 33131

FEI Number: 43-2102868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERAN, FEDERICO
901 BRICKELL KEY BLVD.
704
MIAMI, FL 33131 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: TERAN, FEDERICO E
Address: 901 BRICKELL KEY BLVD. - SUITE 704
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: SMITH, BLANCA E
Address: 901 BRICKELL KEY BLVD- SUITE 704
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: TERNA, MARIANA
Address: 901 BRICKELL KEY BLVD. - SUITE 704
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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

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: FEDERICO TERAN

CEO

01/28/2008

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