

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Aug 17, 2007
Secretary of State**

DOCUMENT# L06000041173

Entity Name: OBJECTS DESIRED, LLC

Current Principal Place of Business:

1790 N. CONGRESS AVENUE
SUITE 200
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

15841 PINES BLVD.
SUITE 210
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 14-1959495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL-POPE, JACQUELINE
1790 N. CONGRESS AVENUE
SUITE 200
BOYNTON BEACH, FL, FL 33426 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: PRES () Delete
Name: CAMPBELL, LILLETH B
Address: 15841 PINES BLVD, SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Delete
Name: POPE, EMMETT
Address: 15841 PINES BLVD., SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Delete
Name: CAMPBELL-POPE, JACQUELINE
Address: 15841 PINES BLVD., SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR () Delete
Name: CAMPBELL, ALFRED A
Address: 15841 PINES BLVD., SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: CAMPBELL, ALFRED A
Address: 15841 PINES BLVD, SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

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

Title: SVP (X) Change () Addition
Name: CAMPBELL-POPE, JACQUELINE
Address: 15841 PINES BLVD., SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP (X) Change () Addition
Name: CAMPBELL, LILLETH B
Address: 15841 PINES BLVD., SUITE 210
City-St-Zip: PEMBROKE PINES, FL 33028

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: JACQUELINE CAMPBELL

SVP

08/17/2007

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