

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060603

FILED
May 05, 2009
Secretary of State

Entity Name: GOTHICA DESIGN BUILD LLC

Current Principal Place of Business:

6056 GARRETT STREET
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

6056 GARRETT STREET
JUPITER, FL 33458

New Mailing Address:

FEI Number: 22-3934663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22 ST., 4TH FL
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

CONSUEGRA, PABLO
6056 GARRETT ST
JUPITER, FL 33458 US

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: PABLO CONSUEGRA

05/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: OMGR () Delete
Name: CONSUEGRA, PABLO
Address: 1313 13TH
City-St-Zip: WEST PALM BEACH, FL 33407

Title: ST () Delete
Name: LONDONO, TATIANA
Address: 1313 13TH WAY
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES:

Title: OMGR (X) Change () Addition
Name: CONSUEGRA, PABLO
Address: 6056 GARRETT ST
City-St-Zip: JUPITER, FL 33458

Title: ST (X) Change () Addition
Name: KHATER, DORY
Address: 1313 13TH WAY
City-St-Zip: WEST PALM BEACH, FL 33407

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: PABLO CONSUEGRA

OMGR

05/05/2009

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