2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000062967

Entity Name: CARIBBEAN HOME DESIGN, LLC

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2004 RIBBON TERRACE 2004 RIBBON TERRACE NORTH PORT, FL 342860702 NORTH PORT, FL 34286

Current Mailing Address: New Mailing Address:

2004 RIBBON TERRACE 2004 RIBBON TERRACE NORTH PORT, FL 342860702 NORTH PORT, FL 34286

FEI Number: 20-5092307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROJAS, YANET 2795 REBEL LANE NORTH PORT, FL 34286 US

MANAGING MEMBERS/MANAGERS:

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

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ADDITIONS/CHANGES:

tle: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 ROJAS, JORGE
 Name:
 ROJAS, JORGE

 Address:
 2004 RIBBON TERRACE
 Address:
 2004 RIBBON TERRACE

 City-St-Zip:
 NORTH PORT, FL 342860702
 City-St-Zip:
 NORTH PORT, FL 34286

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: BLANCO, YOVANY Name: BLANCO, YOVANY

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 BLANCO, YOVANY
 Name:
 BLANCO, YOVANY

 Address:
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 Address:
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Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 ROJAS, YANET
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 ROJAS, YANET

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 NORTH PORT, FL 34286

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: YANET ROJAS MGRM 04/29/2008