

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090126

Entity Name: PALAZZO DESIGNS LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

962-182 AVE EAST
REDINGTON SHORES, FL 33708

New Principal Place of Business:

962-182 AVE EAST
REDINGTON SHORES, FL 33708 US

Current Mailing Address:

962-182 AVE EAST
REDINGTON SHORES, FL 33708

New Mailing Address:

962-182 AVE EAST
REDINGTON SHORES, FL 33708 US

FEI Number: 30-0381334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCARPITTA, SHARON R
962 182 AVE
REDINGTON SHORES, FL 33708 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: SCARPITTA, SHARON R
Address: 962 182 AVE EAST
City-St-Zip: REDINGTON SHORES, FL 33708

Title: MGRM () Delete
Name: SCARPITTA, ROY A
Address: 962 182 AVE EAST
City-St-Zip: REDINGTON SHORES, FL 33708

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCARPITTA, SHARON R
Address: 962 182 AVE EAST
City-St-Zip: REDINGTON SHORES, FL 33708 US

Title: MGRM (X) Change () Addition
Name: SCARPITTA, ROY A
Address: 962 182 AVE EAST
City-St-Zip: REDINGTON SHORES, FL 33708 US

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: SHARON R SCARPITTA

MGRM

04/17/2009

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