

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114819

FILED
Feb 27, 2012
Secretary of State

Entity Name: TRIO DESIGN CONSULTANTS, LLC

Current Principal Place of Business:

17100 COLLINS AVE
SUITE 220
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

17100 COLLINS AVE
SUITE 220
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 20-5960409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STROH, MIKE
17100 COLLINS AVE
SUITE 220
SUNNY ISLES BEACH, FL 33160 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
Name: STROH, MIKE
Address: 17100 COLLINS AVE SUITE 220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: AMSE
Name: BUCKALEW, CHARLES O
Address: 17100 COLLINS AVE SUITE 220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: AMCE
Name: ROGERS, DAVID B
Address: 17100 COLLINS AVE SUITE 220
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: AMA
Name: HRISTOV, OGNIAN
Address: 300 DIPLOMAT PKW # 418
City-St-Zip: HALLANDALE, FL 33009

I hereby 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: MIKE

MGRM

02/27/2012

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