

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000012290

FILED
May 06, 2008
Secretary of State

Entity Name: GDS INVESTMENTS GROUP LLC

Current Principal Place of Business:

2090 N. ATLANTIC AVE.
UNIT #501
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

3805 SUNWARD DR
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

Name and Address of New Registered Agent:

SOTO, JAVIER J
3805 SUNWARD DR
MERRITT ISLAND, FL 32953 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: SOTO, JAVIER J
Address: 3805 SUNWARD DR
City-St-Zip: MERRITT ISLAND, FL 32953

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

Title: MGRM () Delete
Name: DEL RIO, SAMUEL
Address: 590 APACHE TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

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

Title: MGRM () Delete
Name: GERACI, JANIE
Address: 125 CRISPIN STREET
City-St-Zip: MERRITT ISLAND, FL 32952

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

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: JAVIER J. SOTO

MGRM

05/06/2008

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