2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# L07000020678

Entity Name: DRAGONFLY GARDEN DESIGNS LLC

Current Principal Place of Business:

1079 S.E. 13TH AVENUE
HOMESTEAD, FL 33035

New Principal Place of Business:

Current Mailing Address:

1079 S.E. 13TH AVENUE
HOMESTEAD, FL 33035

New Mailing Address:

FEI Number: 20-8720875 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

SARDINAS, PABLO M MGRM
1079 SE 13 AVE
HOMESTEAD, FL 33035 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 SARDINAS 03/20/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SARDINAS, PABLO M
Address: 1079 S.E. 13TH AVENUE
City-St-Zip: HOMESTEAD, FL 33035

Title: MGRM ( ) Delete
Name: POLANCO, SARAI
Address: 1079 S.E. 13TH AVENUE
City-St-Zip: HOMESTEAD, FL 33035

ADDITIONS/CHANGES:

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

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: PABLO SARDINAS MGRM 03/20/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date