


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90128 050 ***138.75

DOCUMENT # L07000041212					
1. Entity Name AKD BUSINESS SOLUTIONS, LLC					
Principal Place of Business 3 GROVE ISLE DRIVE, SUITE C-308 COCONUT GROVE, FL 33133			Mailing Address 3 GROVE ISLE DRIVE, SUITE C-308 COCONUT GROVE, FL 33133		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 26-0195841			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
YOUNG, JOSHUA E 200 S. BISCAYNE BLVD. SUITE 3600 MIAMI, FL 33131			Name DONALD S ROSENBERG Street Address (P.O. Box Number is Not Acceptable) ONE SOUTHEAST THIRD AVE STE 3050 City MIAMI FL 33131 Zip Code 33131		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Donald Rosenberg</i>			DATE 4/7/08		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DEWITT, ANDREW K 3 GROVE ISLE DRIVE, SUITE C-308 COCONUT GROVE, FL 33133 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <i>Andrew DeWitt</i>			Date 4-2-08 Daytime Phone # 516-946-6994		