

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000048410

FILED  
May 22, 2009  
Secretary of State

Entity Name: INTERACTIVE MARKETING DESIGN L.L.C.

**Current Principal Place of Business:**

2500 NW 79 TH STREET  
DORAL, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

2500 NW 79 TH STREET  
DORAL, FL 33122

**New Mailing Address:**

FEI Number: 38-3758519      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

REYES, SOLANGE  
671 NE 195 STREET  
205  
MIAMI, FL 33179 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:**

Title: MGRM ( ) Delete  
Name: REYES, SOLANGE  
Address: 671 NE 195 STREET APT 205  
City-St-Zip: MIAMI, FL 33179

Title: MGRM ( ) Delete  
Name: REYES, ANA M  
Address: 3430 NW 6 ST  
City-St-Zip: MIAMI, FL 33125

Title: MGRM ( ) Delete  
Name: REYES, MARIA  
Address: 3430 NW 6 ST  
City-St-Zip: MIAMI, FL 33125

Title: MGRM (X) Delete  
Name: LOPEZ, CHRISTINA  
Address: 3430 NW 6 ST  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES:**

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

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

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: SOLANGE REYES

MGM

05/22/2009

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