

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000091121

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** ABSOLUTE DESIGN CONCEPTS, LLC

**Current Principal Place of Business:**

11349 NW 47TH LANE  
DORAL, FL 33178 US

**New Principal Place of Business:**

14340 SW 82ND AVE  
PALMETTO BAY, FL 33158 US

**Current Mailing Address:**

11349 NW 47TH LANE  
DORAL, FL 33178 US

**New Mailing Address:**

14340 SW 82ND AVE  
PALMETTO BAY, FL 33158 US

**FEI Number:** 26-0887621

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DOMINGUEZ, MARIA  
11349 NW 47TH LANE  
DORAL, FL 33178 US

**Name and Address of New Registered Agent:**

DOMINGUEZ, MARIA  
14340 SW 82ND AVE  
PALMETTO BAY, FL 33158 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: MARIA DOMINGUEZ

04/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DOMINGUEZ, MARIA G  
Address: 14340 SW 82ND AVE  
City-St-Zip: PALMETTO BAY, FL 33158 US

Title: S  
Name: GEORGE, BOULOS  
Address: 14340 SW 82ND AVE  
City-St-Zip: PALMETTO BAY, FL 33158 US

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: MARIA DOMINGUEZ

MGR

04/13/2012

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