## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000115029

Entity Name: INTERNI DESIGN GD LLC

FILED Jan 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5180 NORTH WEST 7TH STREET SUITE 401 1527 MAIN STREET

MIAMI, FL 33126 SARASOTA, FL 34236 US

**Current Mailing Address: New Mailing Address:** 

5726 CORTEZ ROAD WEST SUITE 219 1527 MAIN STREET

BRADENTON, FL 342102701 US SARASOTA, FL 34236 US

FEI Number: 26-1858331 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAMIREZ, LUIS E RAMIREZ, LUIS E 1350 MAIN STREET UNIT 604 1064 NORTH TAMIAMI TRAIL SARASOTA, FL 34236 SARASOTA, FL 34236 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: MERCEDES C RAMIREZ 01/30/2009

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change ( ) Addition RAMIREZ, LUIS E RAMIREZ, LUIS E Name: Name: 1350 MAIN STREET UNIT 604 Address: 1064 NORTH TAMIAMI TRIAL #1122 Address:

City-St-Zip: SARASOTA, FL 34236 US City-St-Zip: SARASOTA, FL 34236 US

(X) Change ( ) Addition Title: MGRM () Delete Title: MGRM GONZALEZ, MORELLA Name: GONZALEZ, MORELLA Name:

Address: 5180 NORTH WEST 7TH STREET SUITE 401 Address: 1064 NORTH TAMIAMI TRIAL #1122

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 34236

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition GONZALEZ, LUIS RAMIREZ GONZALEZ, LUIS RAMIREZ Name: Name: 5180 NORTH WEST 7TH STREET SUITE 401 Address: Address: 1064 NORTH TAMIAMI TRIAL #1122

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 34236

Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: RAMIREZ, MERCEDES C MGRM Address: Address: 1064 NORTH TAMIAMI TRIAL #1122

City-St-Zip: City-St-Zip: SARASOTA, FL 34236

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: LUIS E RAMIREZ **MGRM** 01/30/2009