

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083097

Entity Name: LD VENTURES GROUP, LLC

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

3173 HARTRIDGE TERRACE
WELLINGTON, FL 33444

New Principal Place of Business:

3173 HARTRIDGE TERRACE
WELLINGTON, FL 33414

Current Mailing Address:

3173 HARTRIDGE TERRACE
WELLINGTON, FL 33444

New Mailing Address:

3173 HARTRIDGE TERRACE
WELLINGTON, FL 33414

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTANA, ELVIN T
3173 HARTRIDGE TERRACE
WELLINGTON, FL 33444 US

Name and Address of New Registered Agent:

SANTANA, ELVIN T
3173 HARTRIDGE TERRACE
WELLINGTON, FL 33414 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:

01/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SANTANA, ELVIN T
Address: 3173 HARTRIDGE TERRACE
City-St-Zip: WELLINGTON, FL 33444

Title: MGRM () Delete
Name: SANTANA, LETICIA
Address: 3173 HARTRIDGE TERRACE
City-St-Zip: WELLINGTON, FL 33444

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SANTANA, ELVIN T
Address: 3173 HARTRIDGE TERRACE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM (X) Change () Addition
Name: SANTANA, LETICIA
Address: 3173 HARTRIDGE TERRACE
City-St-Zip: WELLINGTON, FL 33414

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: ELVIN SANTANA

MGR

01/16/2009

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