2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105828

Entity Name: ISLAND INTERIOR & DESIGN LLC

FILED Mar 18, 2009 Secretary of State

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

9 ISLAND AVENUE, #1409 9 ISLAND AVENUE #1409 MIAMI BEACH, FL 33139 9 MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

9 ISLAND AVENUE, #1409 20 HARBOR POINT

MIAMI BEACH, FL 33139 KEY BISCAYNE, FL 33149 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

BUSINESS FILINGS INCORPROATED 1203 GOVERNORS SQUARE BLVD, SUITE 101 TALLAHASSEE, FL 323012960 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:

MANAGING MEMBERS/MANAGERS:

Electronic Signature of Registered Agent Date

Electronic dignature of registered rigent

ADDITIONS/CHANGES:

itle: MGRM () Delete Title: P (X) Change () Addition

 Name:
 HERRERA, CLAUDIA
 Name:
 HERRERA, CLAUDIA

 Address:
 9 ISLAND AVENUE, #1409
 Address:
 9 ISLAND AVENUE #1409

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 HERRERA, CLAUDIA

 Address:
 Address:
 9 ISLAND AVENUE #1409

 City-St-Zip:
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: CLAUDIA HERRERA MGRM 03/18/2009