


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Aug 06, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000013233**  
1. Entity Name  
DILLON PROPERTIES, LLC



Principal Place of Business 1991 BROADWAY, UNIT 20-A NEW YORK, NY 10023	Mailing Address 1991 BROADWAY, UNIT 20-A NEW YORK, NY 10023
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**DO NOT WRITE IN THIS SPACE**



08012007No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-1050974	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, RAFAEL A  
201 ALHAMBRA CIRCLE, SUITE 702  
CORAL GABLES, FL 33134

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

N/A

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DILLON, JOHN J 1991 BROADWAY UNIT #20A NEW YORK, NY 10023
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08/07/07-80004-019 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**  **JOHN DILLON** 8/2/07 917 796-6492

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #