## 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000000038

Entity Name: DIMENSION CAPITAL MANAGEMENT LLC

FILED Apr 01, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

701 BRICKELL AVENUE STE. 850 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

701 BRICKELL AVENUE STE. 850 MIAMI, FL 33131

FEI Number: 65-0781641 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

TORRES, ONOFRE 701 BRICKELL AVENUE STE. 850 MIAMI, FL 33131 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: D

Name: TORRES, ONOFRE
Address: 701 BRICKELL AVE STE 850

City-St-Zip: MIAMI, FL 33131 US

Title: D

Name: KUESTERMANN, PETER
Address: DIAGONAL 6. #10-31 ZONE 10
City-St-Zip: GUATEMALA CITY., XX

Title:

Name: TOVAR, ALEJANDRO

Address: 520 BRICKELL KEY DR., APT 714

City-St-Zip: MIAMI, FL 33131

Title:

Name: DUENAS, MIGUEL

Address: DIAGONAL 6, #10-31, ZONE 10

City-St-Zip: GUATEMALA CITY,, XX

Title:

Name: HERRERA, RITA

Address: DIAGONAL 6, #10-31, ZONE 10 City-St-Zip: GUATEMALA CITY., XX

Title: D

Name: MARQUES, ALBERT

Address: 15529 MIAMI LAKEWAY N., #103 City-St-Zip: MIAMI LAKES, FL 33014 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 Statues.

SIGNATURE: ONOFRE TORRES D 04/01/2010