

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007039

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: DTP, LLC

## Current Principal Place of Business:

12565 ORANGE DRIVE  
SUITE 403  
DAVIE, FL 33330 US

## New Principal Place of Business:

1700 WEST NEW HAVEN AVENUE  
SUITE 445  
MELBOURNE, FL 32904 US

## Current Mailing Address:

1730 MAIN STREET  
SUITE 216  
WESTON, FL 33326 US

## New Mailing Address:

1700 WEST NEW HAVEN AVENUE  
SUITE 445  
MELBOURNE, FL 32904 US

FEI Number: 26-0060639

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JEFFREY E. CAMPION, PA  
1730 MAIN STREET  
SUITE 216  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

STONE & PESTCOE, P.A.  
150 SOUTH PINE ISLAND ROAD  
SUITE 540  
PLANTATION, FL 33324 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: DAVID STONE

04/22/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: GENOUD, MARTIN  
Address: 12565 ORANGE DRIVE SUITE 403  
City-St-Zip: DAVIE, FL 33330 US

Title: MGRM (X) Delete  
Name: TECHOUEYRES, TOM  
Address: 12565 ORANGE DRIVE SUITE 403  
City-St-Zip: DAVIE, FL 33330 US

Title: MGRM (X) Delete  
Name: BARDO, DAVID  
Address: 12565 ORANGE DRIVE SUITE 403  
City-St-Zip: DAVIE, FL 33330 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: GATTAS, MIGUEL PTD  
Address: 1700 WEST NEW HAVEN AVENUE SUITE 445  
City-St-Zip: MELBOURNE, FL 32904 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIGUEL GATTAS

PTD

04/22/2004

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