


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2004 8:00 am
Secretary of State

02-05-2004 90078 048 ****50.00

DOCUMENT # L03000013471

1. Entity Name
 DRNP, L.L.C.



Principal Place of Business
 C/O HOWARD N. KAHN, ESQ
 4000 HOLLYWOOD BLVD, STE 400 N PRES. CIR
 HOLLYWOOD, FL 33021

Mailing Address
 C/O KIRK HILL INTERNATIONAL HOLDINGS, INC.
 5 COLUMBUS CENTER
 ROAD TOWN, TORTOLA, BVI,

24008120



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02032004 Chg-LLC CR2E083 (10/03)

6. Name and Address of Current Registered Agent

4. FEI Number
 13-4261319

Applied For
 Not Applicable

KAHN, HOWARD N ESQ
 PRESIDENTIAL CIRCLE, STE. 400N
 4000 HOLLYWOOD BLVD.
 HOLLYWOOD, FL 33021

5. Certificate of Status Desired \$5.00 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2004**

Make check payable to
 Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	MGR	<input type="checkbox"/> Delete
NAME	KIRK HILL INTERNATIONAL HOLDINGS, INC.	
STREET ADDRESS	5 COLUMBUS CENTER	
CITY-ST-ZIP	ROAD TOWN, TORTOLA, BVI,	
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify 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 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:  **YAIR DAIKSEL** Feb. 3. 04 786-385 8698
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #