


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90071 044 ****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 %KIRK HILL INTRL 5 COLUMBUS CENTER ROAD TOWN TORTOLA BVI,
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01162006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4231319	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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.

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 May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR KIRK HILL INTERNATIONAL HOLDINGS, INC. 5 COLUMBUS CENTER ROAD TOWN, TORTOLA, BVI,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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DO NOT WRITE IN THIS SPACE

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: *[Signature]* YAIR DANKSEL 1/17/06 786-385-8698

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