2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 09, 2005 08:00 AM

DOCUMENT # L03000022788 1. Entity Name DORNELLES INVESTMENTS, LLC			Secretary of State
2655 LEJEU SUITE 909	pe of Business Mailing Address INE ROAD 2655 LEIEUNE ROAD SUITE 909 LES, FL 33134 US CORAL GABLES, FL 33134	US	
DO NOT WRITE IN THIS SPACE			O1212005No Chg-LLC CR2E083 (10/03) 4. FEI Number Applied For NOT APPLICABLE Not Applicable 5. Certificate of Status Desired S5.00 Additional Fee Required
2655 LEJE SUITE 201	6. Name and Address of Current Registered Agent RONALD G EUNE RD 1 ABLES, 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. SIGNATURE Signature, typed or printed name of registered agent and link if applicable (NOTE Registered Agent signature required when reinstating) DATE			
Filing Fee is \$50.00 Due by May 1, 2005 U00000257261 03/09/05-80047-009 50.00			
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR DORNELLES, JORGE 2655 LEJEUNE RD. # 909 CORAL GABLES, FL 33134		
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11. I hereby certify that the information supplied with this filling 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 animature shall have the same legal effect as if made under oath, that I am a managing member or manager of the imitted liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PRINTED TAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Dayling Phone P			