## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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## DOCUMENT # L05000098855

1. Entity Name

DREAMY LOGO PRODUCTIONS, LLC



**FILED** Feb 18, 2008 08:00 AN Secretary of State

Principal Place of Business

25 SE 2ND AVENUE SUITE 730 MIAMI, FL 33131

Mailing Address P.O. BOX 520687

MIAMI, FL 33152



01172008 No Chg-LLC

CR2E083 (12/07)

Applied For 4. FEI Number 20-3589700 Not Applicable \$5.00 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

GRAYSON, MOISES T 25 SE 2ND AVENUE **SUITE 730** MIAMI, FL 33131

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	bove named entity submits this statement for the purpose of challigations of registered agent.	anging its registered office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept
SIGNATL	JRE		
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	ILE NOW!!! FEE IS \$138.75 May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGMR		
MARKE	RUOLLY TERMED INC		

STREET ADDRESS **6950 NW 77TH COURT** CITY-ST-ZIP MIAMI, FL 33166 TITLE THE ZEIGER CORPORATION NAME STREET ADDRESS 6950 NW 77TH COURT CiTY-ST-ZIP MIAMI, FL 33166 TITLE NAME STREET ADDRESS

1/00000830387 02/26/08-80080-015 138.75

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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11. I hereby certify that the information supplied with this filling 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 of trustile expowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/7/08

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