


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000022935	
1. Entity Name DML HOLDINGS, LLC	

Principal Place of Business 506 106TH AVE. NORTH NAPLES, FL 34108	Mailing Address 506 106TH AVE. NORTH NAPLES, FL 34108
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DO NOT WRITE IN THIS SPACE



01112005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 54-2105920	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	
LAGRASTA, DOMENICO 506 106TH AVE. NORTH NAPLES, FL 34108	

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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 LLC if applicable) (NOTE: Registered Agent's signature required when re-stating) **DATE** _____

Filing Fee is \$50.00
Due by May 1, 2005

U00000257274
03/09/05-80047-017 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR LAGRASTA, DOMENICO 506-106TH AVE. N. NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR LAGRASTA, MARIA 506-106TH AVE. N. NAPLES, FL 34108
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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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: Maria L. Lagasta **MARIA LAGRASTA** 2-25-05 (239) 597-5850

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