

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064634

Entity Name: DYTA, LLC

FILED
Aug 09, 2006
Secretary of State

Current Principal Place of Business:

6817 SOUTHPOINT PARKWAY
UNIT 301 & 302
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6817 SOUTHPOINT PARKWAY
UNIT 301 & 302
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-3263069 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CRABTREE, R R
8777 SAN JOSE BOULEVARD
BUILDING A, SUITE 200
JACKSONVILLE, FL 32217 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR () Delete
Name: MARTINEZ, JOSE M
Address: 6817 SOUTHPOINT PARKWAY, UNIT 301 & 302
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM () Delete
Name: MARTINEZ, SANDRA M
Address: 6817 SOUTHPOINT PARKWAY, UNIT 301 & 302
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOSE MARIA MARTINEZ

DMD

08/09/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date