


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000001334 1. Entity Name DSBI, LLC	
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Principal Place of Business 1450 BRICKELL BAY DR., #1512 MIAMI, FL 33131	Mailing Address 1450 BRICKELL BAY DR., #1512 MIAMI, FL 33131
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01232007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 52-2214549	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 BITRAN, DANIELA 1450 BRICKELL BAY DR., #1512 MIAMI, FL 33131

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>

Filing Fee is \$50.00 Due by May 1, 2007	U00000602695 01/26/07-80100-021 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BITRAN, DANIELA S 1450 BRICKELL BAY DR., #1512 MIAMI, FL 33131
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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.
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SIGNATURE: <u>DANIELA BITRAN</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date <u>1/25/07</u>	Daytime Phone # <u>(305) 213-0081</u>
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