

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR)**

FILED
Apr 07, 2006 8:00 am
Secretary of State

04-07-2006 90216 002 ****50.00

DOCUMENT # L00000005563

1. Entity Name:

DISPENSING PATENTS INTERNATIONAL, LLC



Principal Place of Business

4925 PARK RIDGE BLVD
BOYNTON BEACH FL 33426

Mailing Address

4925 PARK RIDGE BLVD
BOYNTON BEACH FL 33426

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1019907

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/05)



6. Name and Address of Current Registered Agent

BLEAKLEY, DENNIS M
4925 PARK RIDGE BLVD
BOYNTON BEACH FL 33426

7. Name and Address of New Registered Agent

Name

Richard B. Comiter

Street Address (P.O. Box Number is Not Acceptable)
3801 PGA Boulevard

Suite 604

City

Palm Beach Gardens,

FL

Zip Code
33410

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 title if applicable.

Richard B. Comiter

(NOTE: Registered Agent signature required when reinstating)

DATE

3/1/06

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State.
Due By May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
THE PHILIP MESHBERG MGMT TRUST
4925 PARK RIDGE BLVD
BOYNTON BEACH FL 33426 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Boynton Beach, FL 33426 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

The Philip Meshberg MGMT Trust, MGRM

By:

SIGNATURE:

Philip Meshberg, Trustee

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

Date

Daytime Phone #