2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000009462

1. Entity Name 3890 DNBC, L.L.C.



FILED Mar 02, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

6530 W. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487 6530 W. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487



01222007No Chg-LLC

CR2E083 (11/05)

4. FEI Number			Applied For
16-1637957	_		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LEDER, SEAN M 6530 W. ROGERS CIRCLE, SUITE 31 BOCA RATON, FL 33487

DO NOT WRITE IN THIS SPACE

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 talle if applicable.	(NOTE: Repistered Agent signature required when renistating)	DATE		
Filing Fee is \$50.00 Due by May 1, 2007					
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEDER GROUP, INC. 6530 W ROGERS CIRCLE #31 BOCA RATON, FL 33487	03,713. 03,713.	0000653786 707-80035-023 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 faccurate and that my signature shall have the same legal effect as if made under oath; that 1 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:

SEAN M LEDER

561-495-7878

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

Daytime Ph