2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Mar 15, 2007 8:00 am Secretary of State DOCUMENT # L0000009463 02-22-2007 90278 047 ****55 00 NEUWIRTH DNBC, L.L.C. Principal Place of Business Mailing Address 3000m -413 COCONUT ISLE DRIVE 413 COCONUT ISLE DRIVE FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301 CR2E083 (11/05) 01232007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1033152 Not Applicable \$5.00 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent ---GLASSER, GENE ESQ. DO NOT WRITE C/O GREENSPOON MARDER PA 100 WEST CYPRESS CREEK ROAD, SUITE 700 IN THIS SPACE FORT LAUDERDALE, FL 33309 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 itde if applicable. (NOTE: Registered Agent aignature required when remetating) Filing Fee is \$50.00 Due by May 1, 2007. 9. MANAGING MEMBERS/MANAGERS MGR TITLE NAME NEUWIRTH, BARBARA STREET ADDRESS 413 COCONUT ISLE DRIVE CITY-SI-ZIP FT. LAUDERDALE, FL 33301 TITLE MAKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE MALE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 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.

Neuwirth

FILED