## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Feb 07, 2002 8:00 am Secretary of State

	MENT# L01000003	720		02-07-2	JUZ 90166 U4Z ****50.00
1. Entity Name	DBI INVÉSTMENT	s, ile			
	OO NOT WRITE	IN THIS SP	ACE		919109
	washington Ave.	3. Mailing Address  1370 Washin Suite, Apt. #, etc.	gton Ave.	DO NOT WRIT	E IN THIS SPACE
212-26 City & State <b>Miami</b> Zip	Reach FL Country	212-203 City & State Miami Beach Zip	, FL Country	4: FEI Number 65-115	Applied For   Not Applicable
3313		<u>- 331-39 </u>	Name	7. Name and Address of Current  m BArel	Fee Required -
	DO NOT WI	4 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Street Address (	P.O. Box Number is Not Acceptable  Shington Ave. S	.212-203 FL 33139
8. The above n	named entity submits this statement for	the purpose of changing its re	gistered office or register	ni Beach ed agent, or both, in the State of Flo e1, Manager	· · · · · · · · · · · · · · · · · · ·
	ghatire, typed or printed name divegistered agent an	FE Make Check Paya DU	E IS \$50.00 able to Department o E BY MAY 1		DĂTE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER	S/MANAGERS	STREET ADDRESS 137	EL, Haim O Washington Av mi Beach, Fl 33	e. S.212-203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:		NAME: HE STREET ADDRESS! CITY'S 17 ZP		
NAME STREET ADDRESS CITY-ST-ZIP			ITTEC IN A PART	DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	;		NAME TO STREET ADDRESS CITY STATE OF THE STREET ADDRESS CITY STATE OF THE STATE OF	IN THIS S	SPACE
NAME STREET ÁDDRESS CITY-ST-ZIP	·		TITLE HE NAME STREETADDRESS. CIVESTAZIO II.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIPR		
indicated o	ertify that the information supplied with t on this report is true and accurate and the lilty company or the receiver or trustee	hat my signature shall have the	ne exemption stated in Se e same legal effect as if in	iade under oath; that I am a manag	further certify that the information ing member or manager of the

305-532-1880