## LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

Apr 11, 2003 8:00 am Secretary of State 04-11-2003 90549 013 \*\*\*\*50.00

## DOCUMENT # L02000032432

1. Entity Name

DF COMMERC

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C2. Principal P	#, etc.	Pless FL	3. Mailing Address  MB + 214 L  Suite, Apt. #, etc.  City & State	1949 St Rt	DO NOT WRITE IN THIS SPACE  4. FEI Number Applied For
Zip		Country	Zip	Country	5 Contification of Status Decised 55.00 Additional
3420	8	Manates	34208 Manatee		7. Name and Address of Current Registered Agent
	ari da karanta da karanta	O NOT W N THIS SE		Name -Street Add	adorf, B. W. ESQ ddress (P.O. Box Number is Not Acceptable)
8. The above the obligate SIGNATURE	ions of regist	y submits this statement for ered agent.  or printed name of registered agent	22	registered office or re	registered agent, or both, in the State of Florida. I am familiar with, and accept  4 8 03  DATE
	Signature, typed	or printed regime or regime to agent	F Make Check Payabl	EE 19 \$50.00 e to Flo <del>rida Do</del> pa UE BY MAY 1	
9.		MANAGING MEMBE	ERS/MANAGERS		
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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.