

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000032503

FILED
Sep 16, 2008
Secretary of State**Entity Name:** D M R, LLC**Current Principal Place of Business:**160 W. CAMINO REAL
228
BOCA RATON, FL 33432**New Principal Place of Business:****Current Mailing Address:**160 W. CAMINO REAL
228
BOCA RATON, FL 33432**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, LAWRENCE W
701 U.S. HIGHWAY ONE #402
NORTH PALM BEACH, FL 33408 US**Name and Address of New Registered Agent:**KNEER, MICHELLE
290 E ATLANTIC AVENUE
DELRAY BEACH, FL 33444 US

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.

SIGNATURE: MICHELLE KNEER

09/16/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGRM () Delete
Name: MANERO, DAVID
Address: 160 W CAMINO REAL 3 228
City-St-Zip: BOCA RATON, FL 33432Title: P/S () Delete
Name: MANERO, DAVID
Address: 160 WEST CAMINO REAL # 228
City-St-Zip: BOCA RATON, FL 33432Title: VP (X) Delete
Name: MCELHENNY, ROBERT
Address: 160 WEST CAMINO REAL #228
City-St-Zip: BOCA RATON, FL 33432**ADDITIONS/CHANGES:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: DAVID MANERO

MGMR

09/16/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date