## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L02000034353** 

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Lbn ( of.

## 1. Entity Name D & F, L.L.C. Principal Place of Business Mailing Address 1060 KANE CONCOURSE 1060 KANE CONCOURSE BAY HARBOUR ISLANDS, FL 33154 BAY HARBOUR ISLANDS, FL 33154 01092006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2311946 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **NEUHUT, FRANCES** DO NOT WRITE 1060 KANE CONCOURSE BAY HARBOUR ISLANDS, FL 33154 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 Fiorida. I am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM NEWHUT, DENIS NAME STREET ADDRESS 1060 KORE CONCOURSE CITY-ST-ZIP MIAMI, FL 33194 100000388517 TITLE 01/20/06-80008-002 50.00 NAME STREET ADDRESS CITY-ST-ZIP RITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TATLE NAME STREET ADDRESS CITY-ST-ZIP 3171.5

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 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.

FILED

Jan 17, 2006 08:00 AM Secretary of State

Gaylime Phone #