2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002602

Entity Name: DMP UNLIMITED LLC

Current Principal Place of Business:

184 PALOMA DRIVE
CORAL GABLES, FL 33143

New Principal Place of Business:

9021 SW 94 STREET
PH4
MIAMI, FL 33176

Current Mailing Address:

184 PALOMA DRIVE
CORAL GABLES, FL 33143

New Mailing Address:

9021 SW 94 STREET
PH4
MIAMI, FL 33176

FEI Number: 59-3764382   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

PERRIN, MICHAEL
184 PALOMA DRIVE
CORAL GABLES, FL 33143   US

Name and Address of New Registered Agent:

PERRIN, MICHAEL
9021 SW 94 STREET
PH4
MIAMI, FL 33176 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: MIKE PERRIN   02/10/2004
_____
               Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM   ( ) Delete
Name: PERRIN, MICHAEL
Address: 184 PALOMA DRIVE
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM   ( ) Delete
Name: MCWHINNEY, DAVID
Address: 184 PALOMA DRIVE
City-St-Zip: CORAL GABLES, FL 33143

ADDITIONS/CHANGES:

Title: MGRM   (X) Change ( ) Addition
Name: PERRIN, MICHAEL
Address: 9021 SW 94 STREET PH4
City-St-Zip: MIAMI, FL 33176

Title: MGRM   (X) Change ( ) Addition
Name: MCWHINNEY, DAVID
Address: 9021 SW 94 STREET PH4
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL PERRIN   MGRM   02/10/2004
_____
          Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date