

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012248

Entity Name: DOBRAG, L.L.C.

FILED
Apr 07, 2006
Secretary of State

Current Principal Place of Business:

18851 NE 29TH AVE.
SUITE 900
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

18851 NE 29TH AVE.
SUITE 900
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 87-0695203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, LEONARDO A ESQ
18851 NE 29TH AVE
SUITE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SASLAFSKY, MARIANA
Address: 18851 NE 29TH AVE., SUITE 900
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: NAHABETIAN, RODRIGO
Address: 18851 NE 29TH AVE.
City-St-Zip: AVENTURA, FL 33180 US

Title: MGRM () Delete
Name: NAHABETIAN, ALEX
Address: 18851 NE 29TH AVE.
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SASLAFSKY, MARIANA
Address: 18851 NE 29TH AVE., SUITE 900
City-St-Zip: AVENTURA, FL 33180 US

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 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: MARIANA SASLAFSKY

MGRM

04/07/2006

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