

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT****FILED**  
**Jan 27, 2006 8:00 am**  
**Secretary of State**

01-27-2006 90071 044 \*\*\*\*50.00

**DOCUMENT # L03000013471**1. Entity Name  
DRNP, L.L.C.

Principal Place of Business

C/O HOWARD N. KAHN, ESQ  
4000 HOLLYWOOD BLVD STE 400 N PRES. CIR  
HOLLYWOOD, FL 33021

Mailing Address

%KIRK HILL INTL 5 COLUMBUS CENTER  
ROAD TOWN TORTOLA  
BVI,

01162006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

13-4231319

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$5.00 Additional  
Fee Required****6. Name and Address of Current Registered Agent**KAHN, HOWARD N ESQ  
PRESIDENTIAL CIRCLE, STE. 400N  
4000 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33021**DO NOT WRITE  
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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006****9. MANAGING MEMBERS/MANAGERS**TITLE MGR  
NAME KIRK HILL INTERNATIONAL HOLDINGS, INC.  
STREET ADDRESS 5 COLUMBUS CENTER  
CITY-ST-ZIP ROAD TOWN, TORTOLA, BVI,TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

YAIR DANKSEL

1/17/06 786-385-8698

Date

Daytime Phone #