

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016787

FILED
Apr 28, 2009
Secretary of State

Entity Name: DRAGONFLY LLC

Current Principal Place of Business:

10958 NW 62 TERRACE
DORAL, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

10958 NW 62 TERRACE
DORAL, FL 33178 US

New Mailing Address:

FEI Number: 55-0831260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGLADE, CARLOS
10958 NW 62 TERRACE
DORAL, FL 33178 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: ANGLADE, CARLOS
Address: 10958 NW 62 TERRACE
City-St-Zip: DORAL, FL 33178 US

Title: MGR () Delete
Name: ANGLADE, CARLOTA
Address: 10958 NW 62 TERRACE
City-St-Zip: DORAL, FL 33178 US

Title: MGR () Delete
Name: ANGLADE, MERCEDES H
Address: 10958 NW 62 TERRACE
City-St-Zip: DORAL, FL 33178 US

Title: MGR () Delete
Name: ANGLADE, CARLOS G JR
Address: 1060 NE 35 AVENUE
City-St-Zip: HOMESTEAD, FL 33033 US

Title: MGR () Delete
Name: ANGLADE, JUAN C
Address: 555 LAKE SIDE CIRCLE
City-St-Zip: SUNRISE, FL 33326 US

Title: MGR () Delete
Name: ANGLADE, FRANCISCO J
Address: 1420 MARIPOSA CIRCLE UNIT 101
City-St-Zip: NAPLES, FL 34105 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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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: CARLOS ANGLADE

MGRM

04/28/2009

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