


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # L03000019199 1. Entity Name DOREEMAL, LLC	
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Principal Place of Business 333-17TH ST STE 2E VERO BEACH, FL 32960	Mailing Address 333-17TH ST STE 2E VERO BEACH, FL 32960
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DO NOT WRITE IN THIS SPACE

03072008No Chg-LLC CR2E083 (12/07)

4. FEI Number 14-1887091	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

FROMBERG, MALCOLM H ESQ
TWO GROVE ISLE DR., PH-1
COCONUT GROVE, FL 33133

**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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FROMBERG, MALCOLM TWO GROVE ISLE DRIVE, PH-1 COCONUT GROVE, FL 33133
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04/03/08-80029-019 143.75

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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: Malcolm H. Fromberg, Authorized Agent 3-12-08 772-778-4885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #