

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2004 8:00 am
Secretary of State

04-15-2004 90113 025 ****55.00

DOCUMENT # **L03000620222**

1. Entity Name

D & D EIGS, LLC

DBA GIFTS AHoy



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2765 SW 22 STREET

3. Mailing Address

P.O. Box 453334

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33145

Country

USA

Zip

33245

Country

USA

4. FEI Number

75-3117363

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

DANIEL GIGANTINO

Street Address (P.O. Box Number is Not Acceptable)

2031 N. 62 AVENUE

City

HOLLYWOOD

FL

Zip Code

33024

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.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MANAGING MEMBER
DANIEL GIGANTINO
2031 N. 62 AVE
HOLLYWOOD, FL 33024**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MANAGING MEMBER
DEBORAH GIGANTINO
2031 N. 62 AVE.
HOLLYWOOD, FL 33024**

TITLE
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11. I hereby certify that the information supplied with this filing does not qualify 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 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

5-10-04 (305) 858-8040

CR2E083B (12/02)