

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036420

**FILED**  
**Mar 23, 2006**  
**Secretary of State**

**Entity Name:** DYAL INVESTMENTS GROUP, LLC.

**Current Principal Place of Business:**

15872 S.W. 51ST STREET  
MIRAMAR, FL 33027 US

**New Principal Place of Business:**

**Current Mailing Address:**

15872 S.W. 51ST STREET  
MIRAMAR, FL 33027 US

**New Mailing Address:**

FEI Number: 20-0832785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MORIN, PATRICK  
15872 S.W. 51ST STREET  
MIRAMAR, FL 33027 US

**Name and Address of New Registered Agent:**

MORIN, PATRICK MR  
15872 S.W. 51ST STREET  
MIRAMAR, FL 33027 US

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: PATRICK MORIN

03/23/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DUBOIS, LOUIS  
Address: 15872 S.W. 51ST STREET  
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM (X) Delete  
Name: MORIN, PATRICK  
Address: 15872 S.W. 51ST STREET  
City-St-Zip: MIRAMAR, FL 33027 US

**ADDITIONS/CHANGES:**

Title: MGM (X) Change ( ) Addition  
Name: MORIN, PATRICK MGM  
Address: 15872 S.W. 51 STREET  
City-St-Zip: MIRAMAR, FL 33027 US

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: PATRICK MORIN

MGM

03/23/2006

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