

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039560

Entity Name: DT& F, LLC

FILED  
Apr 12, 2005  
Secretary of State

**Current Principal Place of Business:**

1515 SE 17TH ST #131  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

1515 SE 17TH ST #131  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 20-0306702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEPIC, GREGORY J  
9523 BARETTA WINDS PT.  
DELRAY BEACH, FL 33446 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: TRACY, DWIGHT  
Address: 1270 NE 95TH STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: MGR ( ) Delete  
Name: STEPIC, GREGORY J  
Address: 9523 BARLETTE WINDS PT.  
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGRM ( ) Delete  
Name: TYRRELL, MICHAEL E  
Address: 3238 BEECH BERRY CIRCLE  
City-St-Zip: DAVIE, FL 33328

**ADDITIONS/CHANGES:**

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 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 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: GREGORY STEPIC

MGRM

04/12/2005

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