

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040031

FILED
Apr 21, 2005
Secretary of State

Entity Name: DALMAU ENTERPRISES LLC

Current Principal Place of Business:

222 EAST 87TH AVE., APT. 3C
NEW YORK, NY 10128

New Principal Place of Business:

3402 BIMINI LANE
COCONUT CREEK, FL 10128

Current Mailing Address:

222 EAST 87TH AVE., APT. 3C
NEW YORK, NY 10128

New Mailing Address:

3402 BIMINI LANE
#G3
COCONUT CREEK, FL 33066

FEI Number: 56-2414421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 E. JEFFERSON ST.
TALLAHASSEE, FL 32301 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: MGRM () Delete
Name: DALMAU, GABRIEL N
Address: 222 EAST 87TH AVE., APT. 3C
City-St-Zip: NEW YORK, NY 10128

Title: MGRM () Delete
Name: CANTILLO, LISETTE M
Address: 222 EAST 87TH AVE., APT. 3C
City-St-Zip: NEW YORK, NY 10128

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DALMAU, GABRIEL N
Address: 3402 BIMINI LANE
City-St-Zip: COCONUT CREEK, FL 33066

Title: MGRM (X) Change () Addition
Name: CANTILLO, LISETTE M
Address: 3402 BIMINI LANE
City-St-Zip: COCONUT CREEK, FL 33066

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: LISETTE CANTILLO

MEM

04/21/2005

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