2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041905

Entity Name: D.O.S., LLC

Title:

Name: Address:

City-St-Zip:

MGRM

SCHOPP, DAVID

500 S.E. 15TH STREET

SUITE 108, FL 33316 US

() Delete

FILED Mar 10, 2004 Secretary of State

() Change () Addition

Current Principal Place of Business: New Principal Place of Business: 500 S.E. 15TH STREET STE 108 FT. LAUDERDALE, FL 33316 US **New Mailing Address: Current Mailing Address:** 500 S.E. 15TH STREET STE 108 FT. LAUDERDALE, FL 33316 US FEI Number: 20-0467321 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEOPOLD, KORN & LEOPOLD, P.A. 20801 BISCAYNE BLVD. SUITE 501 AVENTURA, FL 33180 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Delete () Change () Addition PEARLMAN, STEWART Name: Name: Address: 500 S.E. 15TH STREET Address: City-St-Zip: SUITE 108, FL 33316 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SHARPE, ORLANDO Name: Address: 500 S.E. 15TH STREET Address: City-St-Zip: SUITE 108, FL 33316 US 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ORLANDO SHARPE MGRM 03/10/2004