

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048127

Entity Name: DILLENGER, LLC

FILED
Mar 28, 2006
Secretary of State

Current Principal Place of Business:

799 CRANDON BLVD. UNIT 1401
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

799 CRANDON BLVD. UNIT 1401
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 20-0658003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALVO, LIZABETH F
328 CRANDON BOULEVARD, SUITE 226
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

BRITO, LEONARDO F
2199 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 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: LEONARDO F. BRITO

03/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALMA ROSA VAZQUEZ GA, STELLU
Address: 799 CRANDON BLVD. UNIT 1401
City-St-Zip: KEY BISCAYNE, FL 33149

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VAZQUEZ GASTELLU, ALMA ROSA
Address: 799 CRANDON BLVD. UNIT 1401
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MBR () Change (X) Addition
Name: MONARRIS, MAURO
Address: 799 CRANDON BLVD. UNIT 1401
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: ALMA ROSA VAZQUEZ GASTELLU

MGRM

03/28/2006

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