## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L0400005707

1. Entity Name
DIS VINTAGE LLC



FILED May 04, 2006 08:00 Al Secretary of State

Principal Place of Business

7455 NE 2ND AVE MIAMI, FL 33133 Mailing Address 7455 NE 2ND AVE MIAMI, FL 33133



04032006 No Chg-LLC

CR2E083 (11/05)

05-30-06

Date

4. FEI Number 33-0388273

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED HE WE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SABBAN, DANIEL 7455 NE 2ND AVE MIAMI, FL 33133

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changions of registered agent.	ing its registere	ed office or registered	agent, or bot	h, in the State of	Florida. I am famil	lar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Bacislaras	Agent signature required wh	en reinstation	·	DATE	
	Signature, types or printed name or registered agent and use it applicable.	(140.15" (160)319:91	1 Agont a grant a laduren wie		<u>,,,,                                 </u>		
Fi Di	ling Fee is \$50.00 ue by May 1, 2006	-	· · · · · · · · · · · · · · · · · · ·		·		
9.	MANAGING MEMBERS/MANAGERS						•
NAME STREET ADDRESS CITY-ST-ZIP	MGR SABBAN, DANIEL 7455 NE 2ND AVE MIAMI, FL 33133						
TITLE NAME STREET ADDRESS GITY-ST-ZIP					05/20/0 05/20/0	00563256 6-80003-02	3 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT \	NRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					 		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					En Tra sa e	angen y an ar a sum	177 - V 178 - 27 APA
11. I hereby	certify that the information supplied with this filing does not of on this report is true and accurate and that my signature sh	ualify to the ea	remptions contained the legal effect as if n	in Chapter 11 nade under o	9, Florida Statut ath; that I am a	es. I further certify managing membe	that the information r or manager of the