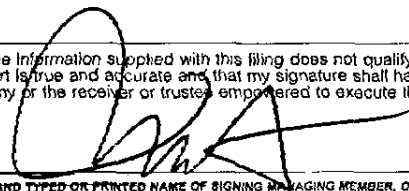


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 21, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000033190 1. Entity Name DMD RANCH, LLC		
Principal Place of Business 20701 SW 232 STREET MIAMI, FL 33170	Mailing Address 100 SE 2ND STREET SUITE 2600 MIAMI, FL 33131	
DO NOT WRITE IN THIS SPACE		
8. Name and Address of Current Registered Agent DIAZ, MICHAEL JR. 100 SE 2ND STREET SUITE 2600 MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DIAZ, MICHAEL JR. 100 SE 2ND STREET, SUITE 2600 MIAMI, FL 33131	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 		Date: 2/15/06 305-375-9220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone



01052006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1122616 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

U00000442710
-03/04/06 80032-011 50.00

**DO NOT WRITE
IN THIS SPACE**