2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# L04000036072

Entity Name: DOMM LLC

Current Principal Place of Business:

725 GLENRIDGE DRIVE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

725 GLENRIDGE DRIVE
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 11-3722467 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

VERGANI, FRANCESCO
725 GLENRIDGE DRIVE
KEY BISCAYNE, FL 33149 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/MANAGERS:

Title:	MGRM	( ) Delete
Name:	VERGANI, FRANCESCO	
Address:	725 GLENRIDGE DRIVE	
City-St-Zip:	KEY BISCAYNE, FL 33149	
Title:	MGRM	( ) Delete
Name:	VERGANI, GIULIO	
Address:	5656 SW 80 ST.	
City-St-Zip:	MIAMI, FL 33143	
Title:	MGRM	( ) Delete
Name:	FOULKS, MONICA	
Address:	350 WEST ENID DR.	
City-St-Zip:	KEY BISCAYNE, FL 33149	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: FRANCESCO VERGANI MGMR 07/05/2007

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