

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000040143

1. Entity Name
DMC, LLC



Principal Place of Business
6925 NW 52ND STREET
MIAMI, FL 33166

Mailing Address
6925 NW 52ND STREET
MIAMI, FL 33166



04182006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1216718

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAMONT NEIMAN INTERIAN & BELLET, P.A.
ONE BISCAYNE TOWER, 3550
TWO S BISCAYNE BLVD
MIAMI, FL 33131

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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	MGR
NAME	YAGHOUBL, CECILIA
STREET ADDRESS	6925 NW 52ND STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	MGR
NAME	MANZANO, DIANA
STREET ADDRESS	6925 NW 52ND STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	MGR
NAME	BERNEY, MARTHA
STREET ADDRESS	6925 NW 52ND STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

UN0000532784
05/06/06-80096-021 50.00

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IN THIS SPACE**

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: *Martha Berney*

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

Date

Daytime Phone #

4/19/06