2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062501

Entity Name: THE DM PROJECT, L.L.C.

FILED Jun 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4976 S.W. 166TH AVENUE MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

4976 S.W. 166TH AVENUE 130 GARTH ROAD

MB# 629 MIRAMAR, FL 33027

SCARSDALE, NY 10583

FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

SUAREZ, GUS ESQ SUAREZ, GUS ESQ. 95 MERRICK WAY 4000 PONCE DE LEON BLVD.. SUITE 470

CORAL GABLES, FL 331461432 US SUITE 100

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: GUS SUAREZ 06/16/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change () Addition BACCHI, CLAUDIO BACCHI, CLAUDIO Name: Name:

4976 S.W. 166TH AVENUE Address: 1 WALKER COURT Address:

City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MONROE TOWNSHIP, NJ 08831

Title: MGRM () Delete Title: MGRM (X) Change () Addition PAPALE, FERNADO Name: PAPALE, FERNADO Name:

Address: 4976 S.W. 166TH AVENUE Address: 235 GARTH ROAD, APT C6D City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: SCARSDALE, NY 10583

Title: MGRM () Delete Title: () Change () Addition

ZNIDARCIC, GABRIEL Name: Name: 4976 S.W. 166TH AVENUE Address: Address: City-St-Zip: MIRAMAR, FL 33027 City-St-Zip:

(X) Change () Addition Title: MGRM () Delete Title: MGRM

Name: CREO, NESTOR Name: CREO, NESTOR 4976 S.W. 166TH AVENUE Address: Address: 237 FOSTER AVENUE City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: VALLEY STREAM, NY 11580

Title: () Delete Title: MGRM () Change (X) Addition

ZNIDARCIC, SERGIO Name: Name: 84-01 MAIN STREET, APT 519 Address: Address: BRIARWOOD, NY 11435 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLAUDIO BACCHI **MGRM** 06/16/2005