## 2006 LIMITED LIABILITY COMPANY

Sec. of 8

## **FILED** May 01 2006 08:00 AM

ANNUAL REPORT				Secretary of State	
1. Entity Name	MENT # L040000632 DLDINGS LLC	26		Secretary or State	,
Principal Place of Business 16780 S.W. 277 STREET HOMESTEAD, FL 33031		Mailing Address 16780 S.W. 277 STREET HOMESTEAD, FL 33031			
DO NOT WRITE IN THIS SPA			CE	03032008 No Chg-LLC CR2E083 (11/05)  4. FEI Number Applied Not Applied Not Applied 27-0107028 Status Desired Status Desired Status Desired Fee Required	dicable
6. Name and Address of Gurrent Registered Agent GONZALEZ, FRANCISO O 16780 S.W. 277 STREET HOMESTEAD, FL 33031				DO NOT WRITE IN THIS SPACE	
the obligat	named entity submits this statement for tions of registered agent.  Streams, have or primed name of registered agent and thing Fee is \$50.00 up by May 1, 2008		ed allice ar register	red agent, or both, in the State of Florida. Lean familiar with, and a defendance of the state o	iccept
9. THE NAME	MANAGING MEMBER MGRM GONZALEZ, FRANSICO O	S/MANAGERS			-
STREET ADDRESS CRIT-ST-DP TITLE RAME STITLET ADDRESS CRIT-ST-ZP TITLE RAME STREET ADDRESS CRIT-ST-ZP	16760 S.W. 277 STREET HOMESTEAD, FL 33031			U00000547274 05/12/06-80017-019 50.00 DO NOT WRITE IN THIS SPACE	O
TITLE			1		

11. I hereby centify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further centify that the information indicated on this report is true and sources and that my signature shall have the same legal effect as it made under only, that I am a managing member or manager of the limited flability company or the receipts of further empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE: :

NAME STREET ADDRESS CITY-ST-ZIP

URE: TELECICO O, CIONZOLEZ SIGNATURE APO TO OR PRINTED NAJE OF SIGNANG MANAGING MUNICIPA, OR AUTHORIZED NEPHESENTATIVE

4 23/06

186-295-3101 Daytone Phone 6