## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000067774

Entity Name: D.A.W. OF FLORIDA, LLC.

EDIFICIO ROYAL PALACE, MEZZ, CHACAITO

CARACAS, EDO. MIRANDA, DF 1050 VL

Address:

City-St-Zip:

FILED Apr 07, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
10750 NW UNIT 304 DORAL, F				
DORAL, I	L 33176 - 03			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
10750 NW UNIT 304				
DORAL, F	L 33178 US			
FEI Number:	: 41-2181195 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
CIFUENTE 10750 NW SUITE 304 DORAL, F	' 66 ST			
	named entity submits this statement for the e of Florida.	e purpose of changing its registered	l office or registered agent, or both	
SIGNATUR	RE:			
	Electronic Signature of Registered A	gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () Delete CIFUENTES, ANA G 10750 NW 66 ST, SUITE 304 DORAL, FL 33178 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGR ( ) Delete CASARES, BLAS R 10750 NW 66 ST, SUITE 304 DORAL, FL 33178 US	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	MGR ( ) Delete ZAMORA, ANTONIO R 201 SOUTH BISCAYNE BLVD, SUITE 2500 MIAMI, FL 33131 US	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title:	MGR ( ) Delete	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ANA G. CIFUENTES MGRM 04/07/2008