

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072634

FILED
Feb 15, 2007
Secretary of State

Entity Name: DFORESTS LLC

Current Principal Place of Business:

P.O. BOX 43-1452
MIAMI, FL 33243

New Principal Place of Business:

8110 OLD CUTLER RD
CORAL GABLES, FL 33143

Current Mailing Address:

P.O. BOX 43-1452
MIAMI, FL 33243

New Mailing Address:

FEI Number: 20-1839015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORALES, DOUGLAS I
8110 OLD CUTLER RD
CORAL GABLES, FL 33143 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: MGR () Delete
Name: MORALES, DOUGLAS I
Address: P.O. BOX 43-1452
City-St-Zip: MIAMI, FL 33243

Title: MGRM () Delete
Name: PRIMARK CONSULTING L, TD
Address: P.O. BOX N-4805
City-St-Zip: NASSAU, BAHAMAS, BS 00000 BS

ADDITIONS/CHANGES:

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 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: DOUGLAS I MORALES

MGR

02/15/2007

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