2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000090810

Entity Name

DIXIE MEWS INVESTORS LLC



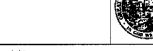
FILED Feb 28, 2008 08:00 AM Secretary of State

Principal Place of Business

75 NE 6TH AVENUE

SUITE 103

DELRAY BEACH, FL 33483



Mailing Address

75 NE 6TH AVENUE

SUITE 103

DELRAY BEACH, FL 33483



01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For	
20-2014806	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

Signature, typed or printed name of registered agent and title if applicable.

6. Name and Address of Current Registered Agent

WEINSTEIN, NORMAN S 75 NE 6TH AVENUE SUITE 103 DELRAY BEACH, FL 33483 DO NOT WRITE 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.	
_	IONATUDE.	

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 5000000342706

03/11/08-80041-014 138.75

MANAGING MEMBERS/MANAGERS 9. MGR TITLE NSW DEVELOPMENT CORP NAME STREET ADDRESS 75 NE 6TH AVENUE, SUITE 103 CITY-ST-ZIP DELRAY BEACH, FL 33483 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE 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:

NAME STREET ADDRESS CITY-ST-ZIP

Norman S. Weinstein

2/25/08

561-278-9292

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

Date

Daytime Phone #