

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093611

FILED  
May 01, 2008  
Secretary of State

Entity Name: DAL USA, LLC

## Current Principal Place of Business:

13014 N. DALE MABRY HWY  
SUITE 335  
TAMPA, FL 33618

## New Principal Place of Business:

13014 N DALE MABRY HWY #335  
TAMPA, FL 33618

## Current Mailing Address:

13014 N. DALE MABRY HWY  
SUITE 335  
TAMPA, FL 33618

## New Mailing Address:

13014 N DALE MABRY HWY #335  
TAMPA, FL 33618

FEI Number: 34-2035215      FEI Number Applied For ( )      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:

MANEY & GORDON, P.A.  
BANK OF AMERICA PLAZA, 101 E, KENNEDY BLVD  
SUITE 3170  
TAMPA, FL 33602 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: S ( ) Delete  
Name: POWELL, TROY  
Address: 13014 N. DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33618

Title: MGRM ( ) Delete  
Name: POWELL, TROY  
Address: 13014 N. DALE MABRY HWY. #335  
City-St-Zip: TAMPA, FL 33618

Title: T ( ) Delete  
Name: POWELL, TROY  
Address: 13014 N. DALE MABRY HWY #335  
City-St-Zip: TAMPA, FL 33618

## ADDITIONS/CHANGES:

Title: S (X) Change ( ) Addition  
Name: POWELL, TROY  
Address: 13014 N DALE MABRY HWY #335  
City-St-Zip: TAMPA, FL 33618

Title: MGRM (X) Change ( ) Addition  
Name: POWELL, TROY  
Address: 13014 N DALE MABRY HWY #335  
City-St-Zip: TAMPA, FL 33618

Title: T (X) Change ( ) Addition  
Name: WILDERMUTH, SHAWN E  
Address: 13014 N DALE MABRY HWY #335  
City-St-Zip: TAMPA, FL 33618

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.

SIGNATURE: TROY POWELL

MGRM

05/01/2008

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