

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 18, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000014350**

1. Entity Name  
**DALMAU HOLDINGS, LLC**



Principal Place of Business  
**600 GRAPETREE DR  
 # 7ES  
 KEY BISCAYNE, FL 33149**

Mailing Address  
**600 GRAPETREE DR  
 # 7ES  
 KEY BISCAYNE, FL 33149**

**DO NOT WRITE IN THIS SPACE**



01152008 No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>11-3745333</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**MIAMI CORPORATE SYSTEMS, INC.  
 283 CATALONIA AVENUE 2ND FLOOR  
 CORAL GABLES, FL 33134**

**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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOT Registered Agent signature required when reinstating)

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

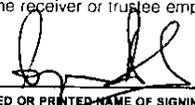
UC00000907431  
 05/05/08-20038-004 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DALMAU, SERGIO P 600 GRAPETREE DR, # 7ES KEY BISCAYNE, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DALMAU, ANA M 600 GRAPETREE DR, # 7ES KEY BISCAYNE, FL 33149
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:**  **4-15-08** **305-863-3409**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #