
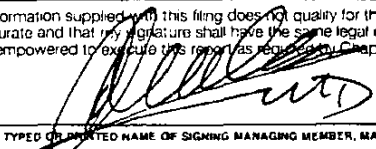
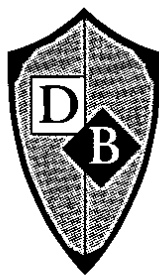


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Sep 08, 2006 8:00 am
Secretary of State

08-22-2006 90007 008 ****50.00

DOCUMENT # L05000048882					
1. Entity Name DALYDA MANAGEMENT, LLC					
Principal Place of Business 2365 NW 41ST STREET BOCA RATON FL 33431			Mailing Address 2365 NW 41ST STREET BOCA RATON FL 33431		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-3562353	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BALDOVIN, PAUL A JR BUTZEL LONG, P.C. SUITE 420, 1200 NORTH FEDERAL HIGHWAY BOCA RATON FL 33432			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title is applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 6, 2006					
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MEDVEST, INC. 2365 NW 41ST STREET BOCA RATON FL 33431	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  DATE _____ DAYTIME PHONE # _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					



ATTACHMENT
DaszkalBolton LLP

CERTIFIED PUBLIC ACCOUNTANTS

30013171

September 6, 2006

Florida Department of State
Division of Corporations
Annual Reports Section
P.O. Box 6478
Tallahassee, Florida 32314

RE: Dalyda Management, LLC
L0500004882

Dear Sir or Madam:

We are writing to you in response to your letter dated August 22, 2006 (see enclosed copy) in which you acknowledge the receipt of the 2006 Limited Liability Company Annual Report and payment of the \$50.00 filing fee. You indicate that in order to file the 2006 Annual Report, you need the federal employer identification number for Dalyda Management, LLC which is 20-3562353. Per your request, we have attached the copy of the 2006 Annual Report with the block 4 (Federal Employer Identification number) completed.

We respectfully request that you update your records for the Federal Employer Identification number so that the 2006 Annual Report for Dalyda Management, LLC can be filed on their behalf.

If there is any additional information that you may need regarding the 2006 Annual Report, do not hesitate to call me.

Very truly yours,

DASZKAL BOLTON LLP
For the Firm

Michele P. Ferrara, CPA
Senior Manager

Enclosures

W:\Clients\Dalyda Limited Partnership - 05882.0\FDRI.tr9.6.06.doc

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2401 PGA Boulevard, Suite 196 ♦ Palm Beach Gardens, Florida 33410-3500 ♦ t: 561.622.8920 ♦ f: 561.624.1151
2700 West Cypress Creek Road, Suite D126 ♦ Fort Lauderdale, Florida 33309-1751 ♦ t: 954.974.3544 ♦ f: 954.974.3680