2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2006
Secretary of State

DOCUMENT# L05000067557

Entity Name: DANORI LLC

Current Principal Place of Business:

2508 S. E. ANCHORAGE COVE
APT B-1
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

2508 S. E. ANCHORAGE COVE
APT B-1
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERNSTEIN, TORI
2508 S.E. ANCHORAGE COVE
APT B-1
PORT ST LUCIE, FL 34952 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: MGRM ( ) Delete
Name: BERNSTEIN, TORI
Address: 2508 E.E. ANCHORAGE COVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: MGRM ( ) Delete
Name: HUMPHRIES, JOHN
Address: 3976 NW GOLDENROD
City-St-Zip: JENSEN BEACH, FL 34957

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: DELCO,
Address: 1920 COVE CIRCLE
City-St-Zip: STUART, FL 34994

Title: MGRM ( ) Change (X) Addition
Name: SHARKCO,
Address: 1151 GREENBRIAR COVE
City-St-Zip: PORT ST LUCIE, FL 34986

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: TORI BERNSTEIN MGRM 01/24/2006

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