

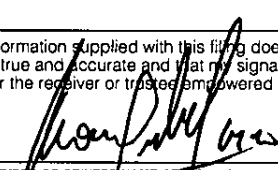


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90201 039 \*\*\*\*50.00

<b>DOCUMENT # L05000086603</b> 1. Entity Name <b>DIRO, LLC</b>					
Principal Place of Business <b>782 N.W. LE JEUNE ROAD SUITE 324 MIAMI, FL 33126</b>			Mailing Address <b>782 N.W. LE JEUNE ROAD SUITE 324 MIAMI, FL 33126</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		  01312006 Chg-LLC CR2E083 (11/05)	
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number <b>20-3404687</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required				6. Name and Address of Current Registered Agent  <b>ESQUIRE CORPORATE SERVICES, INC. 780 N.W. LE JEUNE ROAD SUITE 324 MIAMI, FL 33126</b>	
7. Name and Address of New Registered Agent Name					
Street Address (P.O. Box Number is Not Acceptable)					
City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
[Empty Row]			MGR Romagnoli, Roberto 782 NW LeJuene Road, Suite 635 Miami, Florida 33126		
[Empty Row]			MGR Romagnoli, Marco 782 NW LeJuene Road, Suite 635 Miami, Florida 33126		
[Empty Row]			[Empty Row]		
[Empty Row]			[Empty Row]		
[Empty Row]			[Empty Row]		
[Empty Row]			[Empty Row]		
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.					
<b>SIGNATURE:</b> 			03/01/06 (305) 446-3474		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		

Attachment  
20013348  
#L05000086603  
NICOLAS FERNANDEZ, P.A.

---

ATTORNEYS AT LAW  
780 NORTHWEST LE JEUNE ROAD  
SUITE 324 • LE JEUNE CENTRE  
MIAMI, FLORIDA 33126

NICOLAS FERNANDEZ  
E-MAIL [nick@nferpa.com](mailto:nick@nferpa.com)  
JAVIER GIRAUD  
E-MAIL [javier@nferpa.com](mailto:javier@nferpa.com)  
ISIS VALLE  
E-MAIL [isis@nferpa.com](mailto:isis@nferpa.com)

TELEPHONE (305) 461-0404  
TELECOPIER (305) 461-0410

March 1, 2006

**Via U.S. Mail**

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 6478  
Tallahassee, Florida 32314

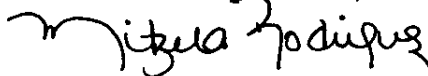
***Re: Maintenance of Diro, LLC/ Document No. L05000086603  
Our Matter: 1033.35***

Dear Sir or Madam:

Enclosed herewith please find the 2005 Uniform Business Report for the above referenced corporation together with check #272 made payable to the Department of State in the amount of \$50.00 representing your fees. Of course, if you should have any questions or comments, please do not hesitate to contact this office. Thank you.

Very truly yours,

NICOLAS FERNANDEZ, P.A.



Mitzela Rodriguez, Legal Assistant  
For the Firm

Enclosures