

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2007 8:00 am
Secretary of State

02-09-2007 90071 008 ****50.00

DOCUMENT # L05000086603



1. Entity Name
DIRO, LLC

Principal Place of Business
**782 N.W. LE JEUNE ROAD
SUITE 324
MIAMI, FL 33126**

Mailing Address
**782 N.W. LE JEUNE ROAD
SUITE 324
MIAMI, FL 33126**

60014442



2. Principal Place of Business - No P.O. Box #
10 N.W. LE JEUNE ROAD

3. Mailing Address
10 N.W. LE JEUNE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 500

SUITE 500

City & State

City & State

MIAMI, FL

MIAMI, FL

Zip

Country

Zip

Country

33126

33126

01152007 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-3404687

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**ESQUIRE CORPORATE SERVICES, INC.
780 N.W. LE JEUNE ROAD
SUITE 324
MIAMI, FL 33126**

7. Name and Address of New Registered Agent

Name
ESQUIRE CORPORATE SERVICES, INC.

Street Address (P.O. Box Number is Not Acceptable)

10 N.W. LE JEUNE ROAD, STE 500

City **MIAMI**

FL

Zip Code
33126

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
ROMAGNOLI, ROBERTO
782 NW LEJUENE RD SE 635
MIAMI, FL 33126** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
ROMAGNOLI, MARCO
782 NW LEJUENE RD STE 635
MIAMI, FL 33126** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
ROMAGNOLI, ROBERTO
10 N.W. LE JEUNE ROAD, STE 500
MIAMI, FL 33126** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
ROMAGNOLI, MARCO
10 N.W. LE JEUNE ROAD STE 500
MIAMI, FL 33126** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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CITY - ST - ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

MARCO ROMAGNOLI 01/31/07