2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000090301

1. Entity Name HDT HOLDINGS, LLC

Mailing Address

Principal Place of Business 11424 S.W. 127 COURT MAIMI, FL 33186

STREET ADDRESS

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS

11424 S.W. 127 COURT MAIMI, FL 33186

FILED Feb 01, 2007 08:00 AM Secretary of State



01182007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 06-1757163 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

KRAMER & RASSNER, P.A. 7700 NORTH KENDALL DRIVE, SUITE 510 MIAMI, FL 33156

11424 S.W. 127 COURT

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of challions of registered agent.	nging its registered office or registered agent, or both, in the State of Florid	da. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and title it applicable.	(NOTE Registered Agent signature received when reinstaling)	DATE
	iling Fee is \$50.00 ue by May 1, 2007	n de	•
9,	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM	· · ·	
NAME	TARAMONA, HERMINE L		
STREET ADDRESS	11424 S.W. 127 COURT		
CITY-ST-ZIP	MAIM!, FL 33186		\$17135 80062-024 55.00
TITLE	MGRM		JUU52-U24 55.UU
MARKE	TARAMONA DANIEL		

CITY-ST-ZIP MAIMI, FL 33186

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE

IN THIS SPACE

city-st-zip

11. I hereby certify the the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this contained in this contained in this contained in 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: & ANSWOWS

X 1/29/07 305-278.4464

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