2008 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

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

ANNUAL REPORT

1. Entity Name DREÁM GIRL, LLC

Principal Place of Business

2252 WYNDAM WAY KISSIMMEE, FL 34743

DOCUMENT # L05000097175

Mailing Address

2252 WYNDAM WAY KISSIMMEE, FL 34743

FILED May 08, 2008 08:00 AN Secretary of State



04082008 No Chg-LLC

CR2E083 (12/07)

Daytime Phone #

4. FEI Number		Applied For
20-3567905		Not Applicable
5. Certificate of Status Desired		O Additional

6. Name and Address of Current Registered Agent

JAIN, MAC 2252 WYNDAM WAY KISSIMMEE, FL 32746

SIGNATURE:

the obligations of registered agent.

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SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	- DATE .	
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
IITLE NAME STREET ADORESS CITY-ST-ZIP	MGRM JAIN, MAC 2252 WYNDAM WAY KISSIMMEE, FL 34743		U00000949942	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		06/03/08-80050-002 138 . 75	
NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· <u>-</u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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.				

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. Lam familiar with, and accept