

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000116602

Entity Name: DOMINVS MAXIMVS, LLC

**FILED**  
**Aug 14, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

357 ALMERIA AVE  
505  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

357 ALMERIA AVE  
505  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 20-4035200      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JORGE, GERALD  
600 GRAPETREE DR  
4CS  
KEYBISCAYNE, FL 33149 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: CEO ( ) Change (X) Addition  
Name: DOMINVS MAXIMVS, LLC,  
Address: 357 ALMERIA AVE #505  
City-St-Zip: CORAL GABLES, FL 33134 US

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: RAMON FERNANDEZ

CEO

08/14/2006

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